



EnvIRONMENTAL  
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Management

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SENT BY CERTIFIED MAIL

28 April 2008

Mr. Eduardo Rovira  
On-Scene Coordinator  
U.S. EPA Region III  
1650 Arch St. (3HS32)  
Philadelphia, PA 19103



Re: *Removal Action Certification Report and Record Drawings* for Former  
Allied Chemical Front Royal Works Site, Front Royal, Virginia EPA  
ID VAD003064003

Dear Mr. Rovira:

On behalf of Honeywell International, Inc., ERM has enclosed two copies of the *April 2008 Removal Action Certification Report and Record Drawings* for the above-referenced site. The Record Drawings are sent under separate cover via certified mail. The Removal Action focused on the two small impoundments, a bermed pit, a perimeter engineered surface water drainage ditch and brick process water conveyance ditch located in the unfenced southern sector of the Site. The Report and Drawings identify and document the implemented removal actions taken in these areas.

If you have any questions or comments please contact me at 410-266-0006 or Mr. Prashant Gupta, Honeywell International, Inc. at 973-455-3023.

Sincerely,

Joseph Lewandowski  
Principal

enclosure:

cc: P. Gupta – Honeywell International, Inc.  
Darren Quillen - ERM (w/o enclosure)

ORIGINAL

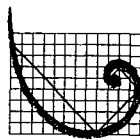
Honeywell International, Inc.

Removal Action  
Certification Report  
Site EPA ID VAD003064003

*Former Allied Chemical –  
Front Royal Works Site  
Front Royal, Virginia*

April 2008

ENVIRONMENTAL RESOURCES MANAGEMENT



ERM®

Honeywell International, Inc.

Removal Action  
Certification Report  
Site EPA ID VAD003064003

*Former Allied Chemical –  
Front Royal Works Site  
Front Royal, Virginia*

April 2008

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**1.0****INTRODUCTION**

Honeywell, Inc. (Honeywell) has completed construction activities associated with the Removal Action (RA) for the Former Allied Chemical Works Site located in Front Royal, Virginia (Site). Activities were conducted in accordance with the United States Environmental Protection Agency (USEPA)-approved Engineering Evaluation/Cost Analysis (EE/CA) report prepared by Environmental Resources Management, Inc. (ERM), dated February 2007. ERM was retained by Honeywell, a successor to the Allied Chemical Works Site, to oversee implementation of the RA.

This Certification Report and the accompanying set of Record Drawings summarize the events leading to the completion of the RA field activities at the Site. Specifically, this report presents the RA activities as completed between November 5 and December 14, 2007; minor punchlist items, as listed in Section 6.0, will be addressed in spring 2008. This report and accompanying drawings discuss the remedial activities, "as-built conditions", site quality assurance/quality control (QA/QC), design modifications, and the achievement of the performance standards as established in the EE/CA report.

The following major sections are included in this Certification Report:

- 1.0 Introduction;
- 2.0 Response Action Requirements;
- 3.0 Construction Implementation;
- 4.0 Construction Modifications;
- 5.0 Construction Quality Assurance/Quality Control;
- 6.0 Future Requirements;
- 7.0 References; and,
- Appendices.

Each section discusses specific Site issues leading to the completion of the RA implementation. Data collected throughout the RA process is appended for reference as supporting documentation.

**1.1****BACKGROUND**

The Site is bordered by the South Fork of the Shenandoah River to both its north and west and, the Old Virginia Packing Company and the Norfolk &

Western Railroad to its east. The former Avtex Fibers-Front Royal, Inc. site defines its southern border.

The Site was a former sulfuric acid manufacturing facility constructed in 1945 under contract from the United States government with the Allied Chemical and Dye Corporation. Shortly after World War II, the United States government declared the facility surplus and sold it to Allied Chemical and Dye Corporation, who continued manufacturing sulfuric acid at the facility until May 1986 when it was sold to General Chemical Corporation. The facility was then purchased by Avtex Fibers, Inc., owners of the adjacent rayon plant, and used as a storage and transfer facility. All operations ceased at the facility in November 1989. On or about March 2000, General Chemical Corporation resumed ownership due to Avtex Fibers' filing for bankruptcy relief. The property was transferred to Honeywell in 2004 as a result of a bankruptcy settlement with General Chemical Corporation.

In September 1998, the USEPA-Region III issued a Unilateral Administrative Order, Docket No. III-98-091-DC, for the entire site. To-date, much of the characterization and remedial activities have been considered and implemented under this Order. These activities primarily relate to the decontamination and demolition of the former sulfuric acid manufacturing plant, associated buildings, process tanks, and piping. The decontamination and demolition activities, as well as the neutralization and disposal of the sulfur slag pile were conducted in 2001 and 2002 under the direction of General Chemical Corporation.

The numerous processing tanks, piping, and associated buildings were located within the current fenced area. Beyond the fenced area is a larger, primarily undeveloped portion of the Site that contains two impoundments (eastern and western), the bermed pit, a perimeter engineered surface-water drainage ditch, and a process water discharge ditch (also referred to as the former acid neutralization channel). The referenced EE/CA report designated these features as Areas of Concern (AOCs). The RA discussed herein focuses on these AOCs; construction modifications are also presented, which include demolition of the cooling tower vault.

In concert with the prior Site-wide remedial activities, a Conservation and Environmental Protection Easement and Declaration of Restrictive Covenants (Easement and Restrictive Covenants) were prepared to further limit any potential future human exposure. The easement and covenants prohibit residential uses of the Site, hunting, and groundwater

use; additionally, the floodplain (located in the western region of the property) will be maintained for conservancy and open space.

Early in 2007, ERM, on behalf of Honeywell, Inc., responded to USEPA-Region III with preparation of the "Engineering Evaluation and Cost Analysis (EE/CA) for select Areas of Concern." The features proposed for closure under this EE/CA included the following:

- eastern impoundment;
- western impoundment;
- bermed pit;
- perimeter drainage ditch; and,
- former acid neutralization channel.

## 1.2 **PROJECT ORGANIZATION**

The RA implementation was conducted by various management, inspection, and construction personnel organized to effectively administer, supervise, inspect, and construct the prescribed remedy in a sound engineering manner and in compliance with the approved-EE/CA report. Honeywell retained ERM to secure a construction contractor, inspect the construction, coordinate with the disposal facility, and ensure compliance with the prescribed RA. Honeywell contracted directly with the disposal facility. The responsibilities assigned to individual project participants are discussed in this section.

### 1.2.1 **Construction Contractor**

ECOR-Solutions, Inc. (ECOR) was the construction contractor for constructing the RA. ECOR was responsible for furnishing all labor, methods, services, materials, equipment, and installation of all materials related to the RA prescribed in the EE/CA report. ECOR was also responsible for implementing construction quality control for the project. The construction contractor was represented by of the following personnel and subcontractors:

- |   |                         |
|---|-------------------------|
| • Construction Contractor<br>Project Manager: | Scott Mortimer          |
| • Construction Contractor<br>Superintendent:  | Scott Newcomer          |
| • Land Surveyor:                              | Marsh & Legge, Inc.     |
| • Soils Disposal Facility:                    | King and Queen Landfill |
| • Hauling:                                    | Reece Services, Inc.    |

## 1.2.2

***Construction Management***

ERM, Inc. provided daily on-site construction management and oversight for design compliance, budget tracking, project scheduling and overall construction conformance with contract drawings and technical specifications. Honeywell, Inc. and ERM project engineering personnel interacted regularly concerning contractual and site construction matters and project schedules. As the construction manager and Site inspector, ERM also provided construction quality assurance (CQA) functions throughout the remediation phase. The Resident Construction Manager (RCM) observed each component of the remedy to assure compliance with the contract specifications. The construction management team was comprised of the following personnel:

- Project Manager: Darren Quillen
- RCM: Ed Schroeder

## 1.2.3

***Regulatory Agency Inspections***

USEPA-Region III oversaw the remediation activities throughout the construction period. The USEPA had the authority to inspect the construction site, review the design and any field revisions, verify that the CQA/CQC practices were being appropriately implemented, and verify that the construction was in compliance with the approved RA. Site inspections were performed both at the outset and completion of the project, November 6<sup>th</sup> and December 13<sup>th</sup>, respectively, by Messrs. Eduardo Rovira and Steve Morphus on behalf of USEPA; routine Site inspections were conducted by Mr. Steve Morphus.

## 2.0

**RESPONSE ACTION REQUIREMENTS**

The RA implementation at the Site was conducted under the jurisdiction of the USEPA, and in accordance with the approved EE/CA report entitled, "Engineering Evaluation/Cost Analysis for Selected Areas of Concern, Former Allied Chemical – Front Royal Works Site, Front Royal, Virginia," dated February 2007. The EE/CA report was developed in response to a Unilateral Administrative Order (Order), Docket No. III-98-091-DC between AlliedSignal, Inc. (predecessor to Honeywell, Inc.), General Chemical Corporation, Avtex Fibers Front Royal, Inc., and the USEPA. The EE/CA report was also prepared in accordance with the requirements of the USEPA "Guidance on Conducting Non-Time Critical Removal Actions Under CERCLA." (USEPA, 1993)

Removal Action Objectives (RAOs) were established to effectively mitigate impacts in a manner that provides short-term and long-term protection of human health and the environment. The RAOs were based on available data collected during field investigations and alternatives evaluation elements specified in the EE/CA Work Plan and were finalized in the EE/CA report to include the following:

- Protect the public health and welfare, and the environment by ensuring that a proper removal response action is conducted to abate, minimize, mitigate, stabilize, and/or eliminate the release or threat of release of hazardous substances at or from the areas of concern.
- Minimize the direct exposure to hazardous substances in the areas of concern.
- Ensure that any action is consistent with any prior activity, or future remediation and land use at the Site.

The removal and off-site disposal of soil and sediment within the AOCs was the selected and USEPA-approved remedy for the Site. The development and implementation of this alternative includes the removal and disposal of impacted sediment and soil, along with backfilling and re-grading of the resulting depressions within the AOCs. The design criteria and performance standards established in the EE/CA report were used to ensure the RA accomplished the aforementioned goals and were as follows:

- Removal and off-site disposal of visually-impacted sediment/soils from the sideslopes and bottom of the perimeter ditch, impoundments, and bermed pit.
- Removal, via pumping, of surface water accumulated in the eastern and western impoundments. The EE/CA report noted that the water would be disposed at an off-site location; however, upon commencement of the RA, a modification request, via correspondence to Mr. Eduardo Rovira, dated November 7, 2007 and subsequent e-mail on November 12 and 16, 2007, was submitted and approved to enable on-site treatment of the water.
- Removal and disposal of specified above-grade and below-grade structures, including pump house, pipes, brick-lined acid-neutralization channel, and other designated structures; in-place abandonment of pipes may also be performed.
- Backfill the depressions in the AOCs with soil from appropriate off-site and/or on-site sources and grade to promote positive drainage, via surface-water sheet flow to eliminate the depressions and potential future storage of surface water. Permanent surface stabilization should be established with grass cover.

As a result of the RA, the performance standards have been, or are being met as documented in the activity descriptions and appendices presented herein. Ultimately, no hazardous substances were encountered during the RA, as all impacted soils and sediment were deemed non-hazardous.

### 3.0

## CONSTRUCTION IMPLEMENTATION

ECOR was retained by ERM to provide all labor, equipment and requisite materials to complete construction of the RA. Their selection was the result of a competitive bidding process. During implementation, ERM provided full-time construction management and oversight of the project throughout construction.

### 3.1

## CONSTRUCTION OVERVIEW

ECOR mobilized to the Site on November 5, 2007 and immediately began construction activities in accordance with the Construction Drawings, Technical Specifications, and the approved-EE/CA report. The RA was substantially completed on December 14, 2007 (minor punchlist items will be addressed in spring 2008). Throughout the entire construction period, a Resident Construction Manager (RCM) from ERM was on-site. Routine oversight inspections on behalf of the USEPA were performed by an USEPA representative, primarily Mr. Steve Morphus.

The RA was comprised of multiple construction activities including, though not limited to, the installation of erosion and sedimentation control devices; clearing and grubbing of vegetation; demolition and removal of ancillary structures; the excavation and removal of soil and sediment from the perimeter ditch, bermed pit, and impoundments; removal and on-site treatment of surface water from the impoundments; the placement and grading of structural and topsoil fill materials, and demolition of the cooling tower vault. The on-site treatment of surface water and demolition of the cooling tower vault were modifications to the RA; further discussion of these activities is provided in Section 4.0 – Construction Modifications.

Each AOC was excavated to remove impacted soils and sediment. The depth of excavation was determined by routine inspections conducted by the RCM to confirm that all visually impacted soils/sediment had been removed prior to backfilling. The quantity of soil/sediment transported and disposed off-site as manifested, was 2226.40 tons. Four (4) topographical survey events were conducted to record the depths of excavation. The actual excavated depths varied throughout each AOC; nonetheless, for the most part, the excavated depths were similar to, or slightly greater, than those anticipated in the EE/CA report. The typical depth of excavation for each AOC is provided in Note 3, Drawing No. 4. It should be noted that five (5) 2.5-foot deep test pits were initially excavated

in the bermed pit to observe the subsurface conditions. Consequently, a wide range of depths were excavated in the bermed pit, including approximately 18 inches in the western and southern regions of the pit, 6 to 9 inches in the northeastern region, and up to 10 feet in the northwestern region.

The sediment excavated from the eastern and western impoundments was too wet for transportation and disposal; therefore, the material was conditioned. The majority of these sediments were mixed with the drier perimeter ditch soils. A small portion of these sediments required mixing with lime. Specifically, 16 tons of lime was used to condition the wet sediments.

Site restoration included placement of structural fill and topsoil, site grading, and temporary seeding and mulching. Structural fill was procured from an off-site source, Rappawan, Inc. located in Front Royal, VA, as well as the excess fill from the perimeter ditch berm. Topsoil was also procured from Rappawan, Inc. The Site was stabilized for the winter season through the application of a temporary seed, primarily consisting of 50/50 mix of winter and annual rye, and surface mulching. In spring 2008, the Site will be inspected for erosion, repaired if necessary, and a permanent seed will be applied. Placement of this permanent vegetative cover system will complete and fulfill the site restoration requirements.

With the exception of those activities presented in Section 4.0 – Construction Modifications, these construction events were conducted in accordance the construction drawings, technical specifications and the EE/CA report.

### 3.2 CONSTRUCTION SEQUENCE

RA implementation was planned and conducted in a logical series of activities to facilitate the execution through substantial completion within a 6-week time period. A brief discussion of the sequence of construction and chronology of events is provided below.

Upon mobilization, site controls were established including the establishment of survey controls. Erosion controls were installed, including silt fence along the southwest Site boundary. The work area delineated by the limits of disturbance was cleared to permit access and construction of the RA. Thereafter, the structures designated for demolition were removed, including the shed, brick channel, and other ancillary features.

Segment 1 of the perimeter ditch was then excavated and backfilled (Segments 1 and 2 are presented in the Record Drawings). Excavated soils were staged in the designated staging area. The cleared trees were chipped and placed over the completed grade to stabilize the surface. Upon backfilling Segment 1 of the ditch, surface water from the impoundments was pumped to the treatment system. The water was treated and stored in the secondary settling tank until discharge, via spray irrigation.

Work activities proceeded with excavation in Segment 2 of the perimeter ditch (see Drawing No. 5). Concurrently, the bermed pit was excavated. Upon completion of Segment 2 and the bermed pit excavation, excavation activities proceeded in both the eastern and western impoundments. Soils from all excavations were staged in the designated area. The wet soils from the impoundments were conditioned with the drier soils from the ditch and/or lime for transportation and disposal purposes. Transportation and disposal of soil materials, spray irrigation of the treated surface water, and site restoration were conducted as the final RA activities.

The chronology of work activities is summarized below:

November 5, 2007	Mobilize to the Site
November 7, 2007	Complete clearing and grubbing
November 8, 2007	Demolish above grade structures
November 10, 2007	Commence perimeter ditch excavation
November 13, 2007	Complete perimeter ditch excavation (Segment 1)
November 16, 2007	Commence backfill of ditch (Segment 1)
November 20, 2007	Pump surface water to treatment system
November 21, 2007	Commence top soil placement (Segment 1)
November 28, 2007	Complete ditch (Segment 2) and bermed pit excavation
November 29, 2007	Complete excavation in impoundments
December 1, 2007	Complete impoundment backfill activities

December 3, 2007	Commence soils transportation and disposal
December 6, 2007	Spray irrigation of treated surface water
December 11, 2007	Complete soils transportation and disposal and demolish cooling tower vault
December 13, 2007	Final Inspection
December 14, 2007	Complete temporary stabilization and demobilization

### 3.3

#### *FINAL SITE INSPECTION*

The final Site inspection was conducted by representatives of the USEPA, Honeywell, ECOR, and ERM on December 13, 2007. The RA was deemed substantially complete. There was, however, a limited punchlist of minor activities that remain to be accomplished, including permanent seeding and removal of erosion controls. USEPA did not identify any apparent deficiencies associated with the RA scope-of-work addressed in the approved EE/CA report.

USEPA requested that the sulfur residuals observed within the previously decommissioned plant area be removed. Reference Section 6 - Future Requirements for further discussion regarding removal of the sulfur residuals. Attendees at the final inspection are listed below:

- Eduardo Rovira – USEPA;
- Steve Morphus – USEPA contractor;
- Prashant Gupta – Honeywell;
- Scott Mortimer – ECOR;
- Ed Schroeder – ERM; and,
- Darren Quillen – ERM.

**4.0****CONSTRUCTION MODIFICATIONS**

Constructions modifications were implemented during the Site remediation activity as a consequence of varying field conditions and operations to improve the implementation and function of the overall remedy. The modifications are consistent with the intent of the approved EE/CA report and were conducted in conjunction with USEPA, or as a direct result of the conditions presented at the time of construction. Those construction modifications are presented below.

**4.1****WOOD CHIP MULCH PLACEMENT**

During the initial construction activities, it was necessary to clear existing trees to gain access to the remediation work zones. These felled trees and shrubs were stockpiled for future on-site reduction by grinding and chipping. Since clearing activities were minimized along the western segment of the perimeter ditch, the area designated for stabilization still resided within a forested area consisting of pine, cedar and hickory trees. Consequently, wood chips from the cleared trees, rather than grass, was used to stabilize an 800-foot long segment of the perimeter ditch. These chips were spread to a depth of 6 to 8 inches, across the width of the former perimeter ditch within the forested area. Decomposition of these chips will promote a regeneration of native trees and shrubs species within a compatible area.

**4.2****ON-SITE TREATMENT OF SURFACE WATER**

At the outset of the project, both the eastern and western impoundments were full of storm water due to recent precipitation. Consequently, ERM submitted a modification request to USEPA, dated November 7 2007, with a proposal to manage the accumulated storm water on-site, via removal and on-site treatment, rather than transportation and off-site management. A subsequent clarification to the on-site treatment concept was discussed and confirmed, via e-mail dated November 16, 2007. The final on-site treatment approach was comprised of the following components:

- Accumulated storm water was removed with a hose situated at the water surface. The intake had a screen to mitigate removal of particulates.

- The water was pumped to a 10,000 gallon tank for primary settlement of solids.
- Water was conveyed from the primary settling tank to a filtration canister. 1 micron bag filters were used in the canister.
- Filtered water was conveyed to a second 10,000 gallon settling tank for further settling.
- The treated water, estimated at 20,000 gallons, was discharged on site, via spray irrigation.

Removal of storm water from the impoundment into the primary settling tank began on November 20, 2007. Water was discharged from the treatment system on December 6, 2007, thereby, yielding 16 days of settlement within the system.

The treatment system was also used to manage the storm water accumulated within the cooling tower vault. The locations of the treatment system and spray irrigation discharge are presented on Drawing No. 4. The referenced correspondence with USEPA is provided in Appendix A.

### 4.3

#### **COOLING TOWER VAULT**

Upon commencement of the construction activities, a concrete vault, referred to herein as the cooling tower vault, was identified in the former plant area. The concrete vault was deemed a safety hazard as a result of open areas in the top of the vault. Consequently, the vault was designated for demolition concurrent with RA activities.

The storm water accumulated in the vault was removed and treated in the on-site treatment system (see Section 4.2). Thereafter, the top of the vault was collapsed into the chamber. The above-grade vault sides were then collapsed inward, into the chamber, and holes were punched in the vault bottom to ensure drainage. Additional concrete rubble from nearby areas was used for filling the remainder of the vault. This rubble was then "tracked in" or compacted by the equipment passing over the area.

**5.0****CONSTRUCTION QUALITY ASSURANCE / QUALITY CONTROL**

Quality assurance and quality control (QA/QC) is an important component of any RA. For this Site, QA/QC primarily consisted of inspections to confirm the removal of visually impacted soils. However, other QA/QC activities included geotechnical testing of backfill soils and surveying. A description of responsibilities, procedures and results throughout construction are presented.

**5.1*****POSITION RESPONSIBILITIES***

ECOR was responsible for the quality of construction and for compliance with the construction documents, drawings and specifications and, fulfilling applicable regulatory requirements. ERM had ultimate responsibility for the oversight of construction and assurance of conformance with the construction drawings, specifications, and the intent of the EE/CA report. QA and QC personnel responsibilities and assignments throughout implementation are discussed below.

**5.1.1*****Construction Quality Assurance***

On behalf of ERM, the on-site RCM had the ultimate responsibility for the oversight of construction and assurance of conformance with the construction drawings, specifications and CQA requirements.

**5.1.2*****Construction Quality Control***

ECOR was responsible for conducting the work in accordance with the EE/CA, the applicable contract specifications and, to do so, employing best industry practices. Construction was conducted in a safe and controlled manner. ECOR was responsible for providing an experienced job site Superintendent capable of ensuring that all applicable quality and contract performance responsibilities were satisfied. All QA activities for the project were coordinated between the RCM and the Contractor's QC/Site Superintendent and together, they had direct control of the construction crew, subcontractors and, project scheduling.

## 5.1.2.1

*Construction Crews*

ECOR employed experienced, safety-trained construction labor. These contractor employees and subcontractors were trained for the functions they performed and the equipment they operated.

## 5.2

**QUALITY ASSURANCE AND QUALITY CONTROL ACTIVITIES**

QA/QC activities included inspections, testing, and surveying. A RCM was on-site full time to inspect all work and ensure that all visually impacted soils were removed. In some areas, the excavations extended both vertically and laterally beyond the estimated limits presented in the EE/CA report to remove the visually impacted materials. In other areas, excavations were not required to the anticipated depths. Ultimately, all excavations were inspected prior to backfilling to ensure removal of visually-impacted soils. The typical depths of excavation are presented on Drawing No. 3; topographical contours for pre-excavation, post-excavation and final (after backfilling) conditions are presented in the Record Drawings. Structural fill and topsoil were procured from an off-site source, Rappawan, Inc., located in Front Royal, VA. Pre-certification geotechnical tests were conducted in accordance with the technical specifications to ensure that the materials were appropriate for backfilling and vegetative growth, respectively. These pre-certification tests are provided in Appendix E.

Structural fill was used primarily in the eastern and northern segments of the perimeter ditch. In-place compaction tests were performed on the procured structural fill to ensure proper compaction (see Appendix E for the results). The remainder of the structural fill for the ditch, impoundments and bermed pit was excess soils from the berm along the western segment of the perimeter ditch. Observations and inspections were performed throughout the placement of the structural fill. These soils were placed and compacted using a John Deere 650J dozer. Compactive efforts were achieved by tracking fill with either the JD650J or, a JD250C track hoe.

## 6.0

**FUTURE REQUIREMENTS**

As determined at the final site inspection conducted on December 13, 2007, attended by the USEPA, Honeywell, ECOR, and ERM representatives, minor items are required to be addressed for the final completion of the RA. These measures will be conducted in spring 2008 and include the following:

- the northern region of the Site (directly north of the plant perimeter fence) will be regraded to promote sheet flow into the existing ditch;
- saturated and excess soils located within the former plant area and on the access road just outside the former plant area will be addressed;
- permanent seeding of disturbed areas will be conducted; and,
- removal of sediment and erosion control measures upon establishment of vegetation and site stabilization.

During the final site inspection, the USEPA identified sulfur residuals located within the former plant area and requested its removal. Specifically, these residuals were observed within the concrete trough parallel to the railroad tracks and scattered in a few areas on the soil surface within the fenced area. This material is believed to be raw materials transported to the Site, via rail, and stored within the sulfur slag pile during plant operations.

During re-mobilization in spring 2008 to address the outstanding items listed above, the sulfur residuals observed in the trough and on the soil surface will be removed and properly disposed. Removal of these materials will likely be conducted by manual means (i.e. hand-shoveling).

Post-construction maintenance and monitoring will be conducted to evaluate the effectiveness of the surface grading to promote sheet flow and permanent stabilization at the Site. Inspection of areas disturbed during the RA will include, but not be limited to, visual observations to determine the occurrence of any of the following items:

- erosion;
- stressed vegetation;
- sufficient settlement/subsidence to prevent sheet flow across the Site; and
- areas of dead or poor vegetative cover.

Areas identified with one or more of the aforementioned items will be repaired. Repair will consist of the placement of additional topsoil and/or seeding, as necessary.

Post-construction maintenance and monitoring will be conducted during spring 2008 activities and upon germination of the permanent seed and surface stabilization; i.e., summer or fall of 2008. Following the establishment of vegetation, sediment and erosion control measures will be removed.

Dames & Moore. 1999. Quality Assurance Project Plan (QAPP) for the Response Action Plan, Allied Front Royal Site. April 1999.

Dames & Moore. 1999a. Response Action Plan – Vessel/line Characterization and Extent of Contamination Study, Allied Front Royal Site. April 1999.

Dames & Moore. 1999b. Site-Specific Health and Safety Plan for the Response Action Plan, Allied Front Royal Site. April 1999.

Dames & Moore. 2000. Risk Evaluation and Response Action Alternative Evaluation, Allied Front Royal Site. May 2000.

ERM. 2007. Engineering Evaluation/Cost Analysis for Selected Areas of Concern, Front Royal Works Site. February 2007.

ERM. 2005. Engineering Evaluation/Cost Analysis Work Plan, Front Royal Works Site. September 2005.

Roux Associates, Inc. 2002. Response Action Plan/Implementation Phase Decontamination and Demolition Report, Former Sulfuric Acid Manufacturing Facility, Front Royal, Virginia. 3 July 2002.

URS. 2002. Revised Report of Findings – Response Action Plan, February 2001 Addendum, Allied Front Royal Site. August 2002.

U.S. Environmental Protection Agency (USEPA). Region III. 1999. Risk-Based Concentration Tables. October, 1999.

U.S. Environmental Protection Agency (USEPA). 1998. Unilateral Administrative Order, Allied Front Royal Site, Docket No. III-98-091-DC, 30 September 1998.

U.S. Environmental Protection Agency (USEPA). 1993. Guidance on Conducting Non-Time Critical Removal Actions Under CERCLA. EPA540-R-93-057.

ORIGINAL

*Appendix A*  
*Selected Correspondence with EPA*

200 Harry S. Truman Pkwy.  
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Annapolis, MD 21401  
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SENT BY ELECTRONIC MAIL

7 November 2007

Mr. Eduardo Rovira  
On-Scene Coordinator  
U.S. EPA Region III  
1650 Arch St. (3HS32)  
Philadelphia, PA 19103

Re: *Management of Surface Water during the Removal Action*  
Former Allied Chemical Front Royal Works Site, Front Royal,  
Virginia EPA ID VAD003064003

Dear Mr. Rovira:

As you are aware, implementation of the non-time critical removal action at the above-referenced site has commenced with the mobilization on November 5, 2007. One of the initial tasks was to remove surface water from the eastern impoundment. Due to the recent precipitation events, water has accumulated in both the eastern and western impoundments; consequently, the quantity of water in the impoundment has greatly increased over the past week. Accordingly, as agreed to during the site visit on Tuesday, November 6, 2007, we will remove the water from the impoundments and conduct on-site treatment.

In accordance with the construction drawings, the upgradient portion of the perimeter ditch, Segment 1, will be excavated and backfilled in the early stages of the project. This approach will minimize the drainage area contributing flow to the impoundments throughout the remainder of construction activities. Concurrent with excavation and backfilling of Segment 1, water will be removed from each impoundment and treated on-site. The treatment scheme is presented below:

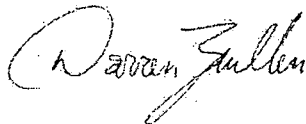
- A hose will be located at the water surface with a screen over the intake;
- The water will be pumped to a frac tank for primary settlement of solids;
- The water will then be pumped to a filtration canister; the filters in the canister will be between 1 and 50 microns;
- The filtered water will then flow through a granular activated carbon (GAC) unit for further treatment;

ORIGINAL

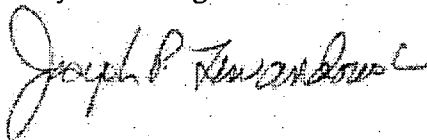
- Lastly, the treated water be conveyed to a frac tank prior to discharge.
- The treated water will be discharged via spray irrigation, or other means of non-concentrated flow. The discharge location will vary to ensure that surface ponding does not occur.

We will call you to verify your agreement with this approach. In the meantime, if you have any questions or comments, please do not hesitate to contact us at 410-266-0006 or Mr. Prashant Gupta, Honeywell International, Inc. at 973-455-3023.

Sincerely,



Darren Quillen, P.E.  
*Project Manager*



Joseph Lewandowski  
*Principal*

cc: Prashant Gupta - Honeywell International, Inc.  
John Mojka - Honeywell International, Inc.  
Ed Schroeder - ERM

ORIGINAL



Rovira.Eduardo@epam  
ail.epa.gov

11/12/2007 10:42 AM

To: Joe.Lewandowski@erm.com  
cc: Darren.Quillen@erm.com  
Subject: Re: Former Allied Chemical Plant - Front Royal, VA

Joe,

Sorry I did not get back to you before. I reviewed the document and I have no problem with the approach.

Regards,

Eduardo Rovira, Jr.  
On-Scene Coordinator  
Eastern Response Branch  
U.S. EPA Middle-Atlantic Region

Joe.Lewandowski@  
erm.com

11/12/2007 10:20  
AM

To  
Eduardo Rovira/R3/USEPA/US@EPA  
cc  
Darren.Quillen@erm.com  
Subject  
Former Allied Chemical Plant -  
Front Royal, VA

Eduardo,

Have you had time to review our request for on-site treatment of the water?

Joe Lewandowski  
ERM  
200 Harry S. Truman Parkway, Suite 400  
Annapolis, MD 21401  
(410) 266-0006

-----  
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ORIGINAL

Joe Lewandowski

11/16/2007 10:41 AM

To: rovira.eduardo@epa.gov, steve.morpus@ttemi.com  
cc: prashant.gupta@honeywell.com, john.mojka@honeywell.com, Darren  
Quillen/ERMINC/ERM@ERM, Edward  
Schroeder/ERMINC/ERM@ERM, Matthew  
Subject: Former Allied Chemical Stie - Front Royal, VA

Eduardo,

This is to confirm our telephone conversation of November 16, 2007 regarding the elimination of the granular activated carbon unit from the treatment process for the surface water from the impoundments.

Further analysis of the situation verifies that carbon treatment of the surface water is unnecessary.

All other units (minus the granular activated carbon unit) of the proposed process scheme as detailed in the November 7, 2007 letter will be installed on-site for the treatment of water from the impoundments.

Thanks for the immediate response to our request.

Joe Lewandowski  
ERM  
200 Harry S. Truman Parkway, Suite 400  
Annapolis, MD 21401  
(410) 266-0006

---

This message contains information which may be confidential, proprietary, privileged, or otherwise protected by law from disclosure or use by a third party. If you have received this message in error, please contact us immediately and take the steps necessary to delete the message completely from your computer system. Thank you. Please visit ERM's web site: <http://www.erm.com>

ORIGINAL

*Appendix B*  
*Record Drawings*  
*(under separate cover)*

ORIGINAL

*Appendix C*  
*Photo History*



Photograph 1 - Wooden shed to be demolished.



Photograph 2 - Demo, removal, and backfill of the cooling tower located within the facility area.

ORIGINAL



Photograph 3 - Perimeter ditch post-excavation along west side, looking north.



Photograph 4 - Perimeter ditch following backfill and grading.



Photograph 5 – Mulch placement along former perimeter ditch area.

ORIGINAL



Photograph 6 – Bermed pit during excavation, looking south.



Photograph 7 – Bermed pit following backfill and grading, looking south.

ORIGINAL



Photograph 8 – Western impoundment during excavation, looking south east.



Photograph 9 – Eastern impoundment during excavation, looking south east.

ORIGINAL



Photograph 10 - Western and eastern impoundments following backfill and grading, looking west.



Photograph 11 - Impacted sediment excavation beyond limits of perimeter ditch at sluice gate.

ORIGINAL



Photograph 12 – Impacted sediment excavation beyond limits of perimeter ditch at rail tracks along the northern fence line.



Photograph 13 – Water treatment system located adjacent to former impoundments area.

ORIGINAL

*Appendix D*  
*Waste Quantities and Manifests*



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

1204010 1415 ORIGINAL  
No.

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
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j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

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Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
g. Driver Signature: 

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Shipment Date

### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
n. Driver Signature: 

--	--	--	--	--	--

  
Shipment Date

## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_  
Signature

Receipt Date

## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling instructions and additional information: \_\_\_\_\_  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 120 2014 ORIGINAL

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
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 Containers 

1	3	8	8	9
---	---	---	---	---

  
j. Description of Waste: Soil k. Quantity 

--	--	--	--	--

 Units 

--

 No. 

1
---

 TYPE 

T
---

  
From surface water impoundments  
and bermed pit

TYPE	
DM	METAL DRUM
DP	PLASTIC DRUM
B	BAG
BA	6 MIL. PLASTIC BAG or WRAP
T	TRUCK
O	OTHER

UNITS	
P	POUNDS
Y	YARDS
M <sup>3</sup>	CUBIC METERS
Y <sup>3</sup>	CUBIC YARDS
O	OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date 

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## Section II TRANSPORTER (Generator Completes a-d, transporter completes e-g, Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II											
a. Name: <u>Reece Services, Inc.</u>		h. Name: _____											
b. Address: <u>17756 Colonial Port RD.</u>		i. Address: _____											
<u>Dumfries, VA 22026</u>													
c. Driver Name/Title: _____	PRINT / TYPE	j. Driver Name/Title: _____	PRINT / TYPE										
d. Phone No.: <u>703-441-0999</u>	e. Truck No.: _____	k. Phone No.: _____	l. Truck No.: _____										
f. Vehicle License No./State: _____		m. Vehicle License No./State: _____											
Acknowledgement of Receipt of Materials.		Acknowledgement of Receipt of Materials.											
g. _____	Shipment Date <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						n. _____	Shipment Date <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
Driver Signature		Driver Signature											

## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. \_\_\_\_\_  
Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date 

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## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date 

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f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 1425

2015 ORIGINAL

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630

e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

j. Description of Waste: Soil

From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 266 and is no longer a hazardous waste as defined by 40 CFR Part 261.

1	3	8	8	9
---	---	---	---	---

Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

Quantity	Units	No.	TYPE
		1	T

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE

d. Phone No.: 703-441-0999

e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

### TRANSPORTER II

h. Name: Peach Tree

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE

k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill

c. Phone No.: 800-785-2146

b. Physical Address: 4443 Iris RD

d. Mailing Address: 4443 Iris RD

Little Plymouth, VA 23091

Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE OPERATOR'S\* SIGNATURE

f. Name and Address of Responsible Agency: \_\_\_\_\_ Date

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 1470

ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
k. Quantity 

1	3	8	8	9
---	---	---	---	---

 Units 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
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GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 266 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. 

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Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. 

--	--	--	--	--	--

  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. 

--	--	--	--	--	--

  
Name of Authorized Agent Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE 

--	--	--	--	--	--

 Date  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 0125 ORIGINAL

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9
---	---	---	---	---

  
j. Description of Waste: Soil k. Quantity 

--	--	--	--	--

 Units 

--

 No. 

1
---

 TYPE 

T
---

  
From surface water impoundments  
and bermed pit

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. 

--	--	--	--	--	--

  
Driver Signature Shipment Date

### TRANSPORTER II

h. Name: Plach Tree  
i. Address: Richmond  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. 

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Driver Signature Shipment Date

## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. 

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Name of Authorized Agent Signature

Receipt Date

## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE 

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 Date  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 0711 ORIGINAL

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
Containers: 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

  
UNITS: 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

### TRANSPORTER II

h. Name: Peach Tree  
i. Address: Richmond  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 0701 2006 ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers  
1 3 8 8 9  
k. Quantity: 

--	--	--	--	--	--

 Units: 

--	--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

#### TRANSPORTER II

h. Name: Peach Tree  
i. Address: Richmond  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 0730 2003

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9
---	---	---	---	---

  
j. Description of Waste: Soil k. Quantity 

--	--	--	--	--

 Units 

--

 No. 

1
---

 TYPE 

T
---

  
From surface water impoundments  
and bermed pit

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S SIGNATURE \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 0718 ORIGINAL  
2010

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
e. Phone No.: 973-455-6719  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Shipment Date: 12/07/07  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
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Containers: 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

  
UNITS: 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

## Section II TRANSPORTER (Generator completes a-d, transporter completes e-g, Transporter II completes h-n)

TRANSPORTER I  
a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_  
TRANSPORTER II  
h. Name: Reece Services  
i. Address: Richmond  
j. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: PA-11-18  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: \_\_\_\_\_ Shipment Date: 12/09/07

## Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

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## Section IV ASBESTOS (Generator completes a-d, I-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE OPERATOR'S\* SIGNATURE: \_\_\_\_\_ Date: 

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f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 0930 ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9	
---	---	---	---	---	--

 Units: 

--	--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
Containers: 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

  
UNITS: 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 PRINT / TYPE  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: 118 4003 Va  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: \_\_\_\_\_  
Shipment Date: \_\_\_\_\_

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: \_\_\_\_\_  
Shipment Date: \_\_\_\_\_

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Receipt Date: \_\_\_\_\_

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
PRINT / TYPE OPERATOR'S\* SIGNATURE Date  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 0940 ORIGINAL

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II TRANSPORTER (Generator completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: 118 485  
Acknowledgement of Receipt of Materials.  
g. \_\_\_\_\_  
Driver Signature

PRINT / TYPE

Truck No.:

Shipment Date

### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. \_\_\_\_\_  
Driver Signature

PRINT / TYPE

Truck No.:

Shipment Date

## Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_  
Name of Authorized Agent

Signature

Receipt Date

## Section IV ASBESTOS (Generator completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. LAST 10A2056

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
e. Phone No.: 973-455-6719  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8			Y	7		
--	--	---	---	---	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

				1	5	
--	--	--	--	---	---	--

 Units: Y No. 

		1	
--	--	---	--

 TYPE: 

	T
--	---

  
Containers: 

--	--	--	--	--	--

  
TYPE:  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
UNITS:  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: SCHROEDER Signature: [Signature] Shipment Date: 12/12/07

## Section II TRANSPORTER (Generator completes a-d; transporter completes e-g; transporter II completes h-i)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: \_\_\_\_\_ Shipment Date: 

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h. Name: WAKES  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: 111-2161 VA  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: \_\_\_\_\_ Shipment Date: 12/12/07

## Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

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## Section IV ASBESTOS (Generator completes a-d; f-g; Operator completes e-h)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE: \_\_\_\_\_ Date: 

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f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL  
2055

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name:  
h. Owner's Phone No.:  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity 

1	3	8	8	9
---	---	---	---	---

 Units 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
Containers 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

  
UNITS 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: SCHLOEDER Signature: E Shipment Date: 12/1/07

## Section II TRANSPORTER (Generator completes a and transporter completes a-j. Transporter completes only)

TRANSPORTER I  
a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title:  
d. Phone No.: 703-441-0999 e. Truck No.:  
f. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: Shipment Date:  
TRANSPORTER II  
h. Name: MANNING  
i. Address:  
j. Driver Name/Title:  
k. Phone No.: l. Truck No.:  
m. Vehicle License No./State: YH59154 - VA  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: Shipment Date: 12/1/07

## Section III DESTINATION (Generator completes a-d, destination site completes a-j)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: Signature: Receipt Date:

## Section IV ASBESTOS (Generator completes a-d, f-g. Operator completes e)

a. Operator's\* Name:  
b. Operator's\* Phone No.:  
c. Operator's\* Address:  
d. Special Handling Instructions and additional information:  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: PRINT / TYPE OPERATOR'S\* SIGNATURE Date:  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both % friable % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL  
2054

## SECTION I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

				1	3	8	8	9
--	--	--	--	---	---	---	---	---

 Units: 

				1	8
--	--	--	--	---	---

 No. 

		1	
--	--	---	--

 TYPE 

		T	
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Containers: 

TYPE	
DM	METAL DRUM
DP	PLASTIC DRUM
B	BAG
BA	6 MIL. PLASTIC BAG or WRAP
T	TRUCK
O	OTHER

  
UNITS: 

UNITS	
P	POUNDS
Y	YARDS
M <sup>3</sup>	CUBIC METERS
Y <sup>3</sup>	CUBIC YARDS
O	OTHER

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: [Signature] Signature: [Signature] Shipment Date: 12/11/07

## SECTION II TRANSPORTER I (Generator completes a-4; Transporter completes 5-9)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: \_\_\_\_\_ Shipment Date: 

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## TRANSPORTER II

h. Name: PIERCE  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: 43743P VA  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: \_\_\_\_\_ Shipment Date: 12/11/07

## SECTION III DESTINATION (Generator completes a-4; destination site completes 5-9)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

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## SECTION IV ASBESTOS (Generator completes a-4; Asbestos Operator completes 5-9)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE: \_\_\_\_\_ OPERATOR'S\* SIGNATURE: \_\_\_\_\_ Date: 

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f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL  
2053

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
g. Owner's Name:  
h. Owner's Phone No.: 410 782 1311  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No.: 

1
---

 TYPE: 

T
---

  
Containers: 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

  
UNITS: 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: SCHNEIDER Signature: [Signature] Shipment Date: 

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## Section II TRANSPORTER (Generator completes a, d, transporter completes b, c, g, transporter II completes h, i)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: [Signature] PRINT / TYPE  
d. Phone No.: 703-441-0999 e. Truck No.:  
f. Vehicle License No./State: 119-971 VA  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: [Signature] Shipment Date: 

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h. Name: [Signature]  
i. Address:  
j. Driver Name/Title: PRINT / TYPE  
k. Phone No.: l. Truck No.:  
m. Vehicle License No./State: 119-971 VA  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: [Signature] Shipment Date: 

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## Section III DESTINATION (Generator completes a, b, c, d, destination completes e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
f. Name of Authorized Agent: [Signature] Signature: [Signature] Receipt Date: 

--	--	--	--	--

## Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Operator's\* Name: b. Operator's\* Phone No.:  
c. Operator's\* Address:  
d. Special Handling Instructions and additional information:  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Signature] PRINT / TYPE OPERATOR'S\* SIGNATURE: [Signature] Date: 

--	--	--	--	--

  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both          % friable          % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2052 ORIGINAL

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
c. Address: 101 Columbia Road  
Morristown, NJ 07960

b. Generating Location: Former Allied Chemical - Front Royal  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

e. Phone No.: 973-455-6719  
If owner of the generating facility differs from the generator, provide:

f. Phone No.: \_\_\_\_\_

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: 410 782 1211

i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

Containers 

1	3	8	8	9
---	---	---	---	---

  
k. Quantity 

			13	7
--	--	--	----	---

 Units 

--	--	--	--	--

 No. 

	1	
--	---	--

 TYPE 

	T	
--	---	--

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Shipment Date: 12/11/97

## Section II TRANSPORTER (Generator completes a and b; transporter completes c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_

### TRANSPORTER II

h. Name: EAP  
i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: 770024  
m. Vehicle License No./State: 44 S05P  
Acknowledgement of Receipt of Materials.

n. Driver Signature: \_\_\_\_\_ Shipment Date: 12/11/97

## Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_

Receipt Date: \_\_\_\_\_

## Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 2050

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: Site 410 752 1311  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: Schroeder Signature: \_\_\_\_\_ Shipment Date: 12/11/07  
Containers: 

1	3	8	8	9
---	---	---	---	---

 TYPE: 

DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

  
UNITS: 

P	- POUNDS
Y	- YARDS
M <sup>3</sup>	- CUBIC METERS
Y <sup>3</sup>	- CUBIC YARDS
O	- OTHER

## Section II TRANSPORTER (Generator completes a, d, Transporter completes b, c, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: 724  
f. Vehicle License No./State: 72 0226 VA  
g. Driver Signature: \_\_\_\_\_ Shipment Date: 12/11/07  
h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
n. Driver Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_

## Section III DESTINATION (Generator completes a, d, destination site completes b, c, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

## Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE: \_\_\_\_\_ OPERATOR'S\* SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2068

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell

c. Address: 101 Columbia Road  
Morristown, NJ 07960

e. Phone No.: 973-455-6719

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

j. Description of Waste: Soil

From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

b. Generating Location: Former Allied Chemical - Front Royal

d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

f. Phone No.: \_\_\_\_\_

h. Owner's Phone No.: 910 782 1311

1	3	8	8	9
---	---	---	---	---

Containers

Quantity	Units	No.	TYPE
1	1	1	T

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

1	2	1	1	0	7
---	---	---	---	---	---

Shipment Date

## Section II TRANSPORTER (Generator completes a-d; Transporter completes e-g; Transporter II completes h-i)

### TRANSPORTER I

a. Name: Reece Services, Inc.

b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_

PRINT / TYPE

d. Phone No.: 703-441-0999

e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

g. \_\_\_\_\_

Driver Signature

Shipment Date

### TRANSPORTER II

h. Name: MARKS CONSTRUCTION

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_

PRINT / TYPE

k. Phone No.: \_\_\_\_\_

l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: 111-261 VA

Acknowledgement of Receipt of Materials.

n. \_\_\_\_\_

Driver Signature

Shipment Date

## Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: King & Queen Landfill

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146

d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

--	--	--	--	--	--

0740 -  
Flat tire -  
did not load -  
FL and return.

## Section IV ASBESTOS (Generator completes a-b; Operator completes c-f)

a. Operator's Name: \_\_\_\_\_

b. Operator's Phone No.: \_\_\_\_\_

c. Operator's Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S SIGNATURE

Date

f. Name and Address  
of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

20 ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: **Honeywell**  
b. Generating Location: **Former Allied Chemical - Front Royal**  
c. Address: **101 Columbia Road**  
**Morristown, NJ 07960**  
d. Address: **Kendrick Lane** **Work Site**  
**Front Royal, VA 22630**  
e. Phone No.: **973-455-6719**  
f. Phone No.:  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name:  
h. Owner's Phone No.:  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: **Soil**  
**From surface water impoundments and bermed pit**

Containers  
1 3 8 8 9

Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER

k. Quantity Units No. TYPE  
1 T

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, transporter II completes h-n)

#### TRANSPORTER I

#### TRANSPORTER II

a. Name: **Reece Services, Inc.**  
b. Address: **17756 Colonial Port RD.**  
**Dumfries, VA 22026**  
c. Driver Name/Title:  
d. Phone No.: **703-441-0999**  
e. Truck No.:  
f. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
g. Driver Signature  
Shipment Date  
h. Name:  
i. Address:  
j. Driver Name/Title:  
k. Phone No.:  
l. Truck No.:  
m. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
n. Driver Signature  
Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: **King & Queen Landfill**  
b. Physical Address: **4443 Iris RD**  
**Little Plymouth, VA 23091**  
c. Phone No.: **800-785-2146**  
d. Mailing Address: **4443 Iris RD**  
**Little Plymouth, VA 23091**  
e. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

i. Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name:  
b. Operator's\* Phone No.:  
c. Operator's\* Address:  
d. Special Handling Instructions and additional information:  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title:  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both % friable % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2046  
ORIGINAL

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
g. Owner's Name: 410 102 1311  
h. Owner's Phone No.:  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name SCHWEDER Signature [Signature] Shipment Date 12/10/07  
Containers 

1	3	8	8	9
---	---	---	---	---

 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II TRANSPORTER (Generator completes a-d, transporter completes e-g, transporter completes h-m)

TRANSPORTER I  
a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: [Signature]  
d. Phone No.: 703-441-0999 e. Truck No.:  
f. Vehicle License No./State: [Signature]  
Acknowledgement of Receipt of Materials.  
g. Driver Signature [Signature] Shipment Date 12/10/07  
TRANSPORTER II  
h. Name: CROWN  
i. Address:  
j. Driver Name/Title: [Signature]  
k. Phone No.: 109-971 l. Truck No.: VA  
m. Vehicle License No./State: [Signature]  
Acknowledgement of Receipt of Materials.  
n. Driver Signature [Signature] Shipment Date 12/10/07

## Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent [Signature] Signature [Signature] Receipt Date 12/10/07

## Section IV ASBESTOS (Generator completes a-d, operator completes e-g)

a. Operator's\* Name: [Signature]  
b. Operator's\* Phone No.: [Signature]  
c. Operator's\* Address: [Signature]  
d. Special Handling Instructions and additional information: [Signature]  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Signature] PRINT / TYPE OPERATOR'S\* SIGNATURE [Signature] Date 12/10/07  
f. Name and Address of Responsible Agency: [Signature]  
g. ☐ Friable; ☐ Non-friable; ☐ Both [Signature] % friable [Signature] % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2045 ORIGINAL

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name:  
h. Owner's Phone No.: 909-221-1211  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

1	B	I
---	---	---

 No.: 

1
---

 TYPE: 

T
---

  
Containers: 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

  
UNITS: 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: S. K. K. K. K. Signature: [Signature] Shipment Date: 12/10/07

## Section II TRANSPORTER I (Generator completes a and b; Transporter completes c-g)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: [Signature]  
d. Phone No.: 703-441-0999 e. Truck No.: 1  
f. Vehicle License No./State: 43943 P VA  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: [Signature] Shipment Date: 12/10/07

## Section II TRANSPORTER II (Generator completes a and b; Transporter completes c-g)

h. Name: PIERCE  
i. Address: [Blank]  
j. Driver Name/Title: [Blank]  
k. Phone No.: [Blank] l. Truck No.: [Blank]  
m. Vehicle License No./State: 43943 P VA  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: [Signature] Shipment Date: 12/10/07

## Section III DESTINATION (Generator completes a, b, c; Destination completes d-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: [Blank]  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: [Signature] Signature: [Signature] Receipt Date: 12/10/07

## Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g; Operator completes h-i)

a. Operator's\* Name: [Blank]  
b. Operator's\* Phone No.: [Blank]  
c. Operator's\* Address: [Blank]  
d. Special Handling Instructions and additional information: [Blank]  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Blank] PRINT / TYPE: [Blank] OPERATOR'S\* SIGNATURE: [Signature] Date: 12/10/07  
f. Name and Address of Responsible Agency: [Blank]  
g. ☐ Friable; ☐ Non-friable; ☐ Both [Blank] % friable [Blank] % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL  
2044

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: 973 455 6719  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
CONTAINERS  
1 3 8 8 9  
k. Quantity: 

				1	8	9
--	--	--	--	---	---	---

 Units: 

				1	
--	--	--	--	---	--

 No. 

				1	
--	--	--	--	---	--

 TYPE: 

				T	
--	--	--	--	---	--

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: SHIRAZ Signature: \_\_\_\_\_ Shipment Date: 12/10/07

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M <sup>3</sup>	- CUBIC METERS
Y <sup>3</sup>	- CUBIC YARDS
O	- OTHER

## Section II TRANSPORTER (Generator completes a-d; Transporter completes e-g; Transporter II completes h-j)

TRANSPORTER I  
a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: \_\_\_\_\_ Shipment Date: 12/10/07

TRANSPORTER II  
h. Name: DMIC  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: 959-0319 10152  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: \_\_\_\_\_ Shipment Date: 12/10/07

## Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 12/10/07

## Section IV ASBESTOS (Generator completes a-d; f-g; Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE: \_\_\_\_\_ Date: 12/10/07  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both: \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2043

## GENERATOR (Generator Completes All of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
g. Owner's Name:  
h. Owner's Phone No.: 703-410-7821  
i. BFI WASTE CODE: 

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
CONTAINERS  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: SCHKIEFER Signature: [Signature] Shipment Date: 11/10/01

## TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: [Signature] PRINT / TYPE  
d. Phone No.: 703-441-0999 e. Truck No.:  
f. Vehicle License No./State: [Signature]  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: [Signature] Shipment Date: 11/10/01

## TRANSPORTER II

h. Name:  
i. Address:  
j. Driver Name/Title: [Signature] PRINT / TYPE  
k. Phone No.: 425-505 P VA l. Truck No.:  
m. Vehicle License No./State: 42505 P VA  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: [Signature] Shipment Date: 11/10/01

## DESTINATION (Generator Completes a-d, destination file completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: [Signature] Signature: [Signature] Receipt Date: 11/10/01

## ASBESTOS (Generator Completes a-d, f.g. Operator completes e)

a. Operator's\* Name: [Signature]  
b. Operator's\* Phone No.: [Signature]  
c. Operator's\* Address: [Signature]  
d. Special Handling Instructions and additional information: [Signature]  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Signature] PRINT / TYPE OPERATOR'S\* SIGNATURE [Signature] Date: 11/10/01  
f. Name and Address of Responsible Agency: [Signature]  
g. ☐ Friable; ☐ Non-friable; ☐ Both [Signature] % friable [Signature] % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL  
2042

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name:  
h. Owner's Phone No.: 410 102 1211  
i. BFI WASTE CODE  

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: S. KIEDER Signature: [Signature] Shipment Date: 12/10/97

Containers  

1	3	8	8	9
---	---	---	---	---

  
k. Quantity  

				10	7
--	--	--	--	----	---

  
Units  

				1	T
--	--	--	--	---	---

  
No. TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title:  
d. Phone No.: 703-441-0999  
e. Truck No.:  
f. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: [Signature] Shipment Date: 12/10/97

## Section II TRANSPORTER II

h. Name: Man...  
i. Address:  
j. Driver Name/Title:  
k. Phone No.: 703-321  
l. Truck No.:  
m. Vehicle License No./State: A2004P  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: [Signature] Shipment Date: 12/10/97

## Section III DESTINATION (Generator completes a, d, destination site completes b, c)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: [Signature] Receipt Date: 12/10/97

## Section IV ASBESTOS (Generator completes a, b, c, g. Operator completes d, e)

a. Operator's Name:  
b. Operator's Phone No.:  
c. Operator's Address:  
d. Special Handling Instructions and additional information:  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Signature] OPERATOR'S SIGNATURE: [Signature] Date: 12/10/97  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both          % friable          % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE 

		L	I	8			Y	7		
--	--	---	---	---	--	--	---	---	--	--

 Containers 

1	3	8	8	9	
---	---	---	---	---	--

 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## Section II TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date \_\_\_\_\_

## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2040

## Section I

### GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell

b. Generating Location: Former Allied Chemical - Front Royal

c. Address: 101 Columbia Road  
Morristown, NJ 07960

d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

e. Phone No.: 973-455-6719

f. Phone No.: \_\_\_\_\_

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: 410-752-1311

i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No.: 

1
---

 TYPE: 

T
---

Containers: \_\_\_\_\_

TYPE:  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER

UNITS:  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name: SCHROEDER Signature: \_\_\_\_\_ Shipment Date: 

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## Section II

### TRANSPORTER I

a. Name: Reece Services, Inc.

b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_

d. Phone No.: 703-441-0999

e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_

g. Driver Signature: \_\_\_\_\_

Shipment Date: 

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### TRANSPORTER II

h. Name: MARK POL

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_

k. Phone No.: \_\_\_\_\_

l. Truck No.: 10215

m. Vehicle License No./State: 42802 P

n. Driver Signature: \_\_\_\_\_

Shipment Date: 

1	2	1	0	0	7
---	---	---	---	---	---

## Section III

### DESTINATION (Generator completes a, d, destination; transporter completes b, c)

a. Site Name: King & Queen Landfill

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146

d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

f. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

g. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

--	--	--	--	--	--

## Section IV

### ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Operator's\* Name: \_\_\_\_\_

b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 223

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9	
---	---	---	---	---	--

  
j. Description of Waste: Soil k. Quantity 

--	--	--	--	--	--

 Units 

--

 No. 

1
---

 TYPE 

T
---

  
From surface water impoundments  
and bermed pit

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, transporter completes e-g, transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. 

--	--	--	--	--	--

  
Driver Signature Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. 

--	--	--	--	--	--

  
Driver Signature Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2038

## GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell

c. Address: 101 Columbia Road  
Morristown, NJ 07960

e. Phone No.: 973-455-6719

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

j. Description of Waste: Soil

**From surface water impoundments  
and bermed pit**

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name \_\_\_\_\_

Signature \_\_\_\_\_

b. Generating Location: Former Allied Chemical - Front Royal

d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

f. Phone No.: \_\_\_\_\_

h. Owner's Phone No.: 1-800-1021321

1	3	8	8	9
---	---	---	---	---

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

k. Quantity \_\_\_\_\_ Units \_\_\_\_\_ No. 1 TYPE T

--	--	--	--	--	--	--	--	--	--

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

1	2	1	0	0	7
---	---	---	---	---	---

Shipment Date

## TRANSPORTER I

a. Name: Reece Services, Inc.

b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: V. NICHOLSON PRINT / TYPE

d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: FIS - FIS VA

Acknowledgement of Receipt of Materials.

g. Driver Signature \_\_\_\_\_

1	2	1	0	0	7
---	---	---	---	---	---

Shipment Date

## TRANSPORTER II

h. Name: \_\_\_\_\_

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE

k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

n. Driver Signature \_\_\_\_\_

--	--	--	--	--	--

Shipment Date

## DESTINATION (Generator completes a, c, destination site completes b, d)

a. Site Name: King & Queen Landfill

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146

d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent \_\_\_\_\_

Signature \_\_\_\_\_

--	--	--	--	--	--

Receipt Date

## ASBESTOS (Generator completes a, b, c, Operator completes d, e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2037

**GENERATOR** (Generator completes all of Section I)

a. Generator Name: <u>Honeywell</u>	b. Generating Location: <u>Former Allied Chemical - Front Royal</u>																						
c. Address: <u>101 Columbia Road</u> <u>Morristown, NJ 07960</u>	d. Address: <u>Kendrick Lane</u> <u>Work Site</u> <u>Front Royal, VA 22630</u>																						
e. Phone No.: <u>973-455-6719</u>	f. Phone No.: _____																						
If owner of the generating facility differs from the generator, provide:																							
g. Owner's Name: _____	h. Owner's Phone No.: <u>410 702 1211</u>																						
i. BFI WASTE CODE	Containers																						
<table border="1"><tr><td></td><td></td><td>L</td><td>I</td><td>8</td><td></td><td></td><td></td><td>Y</td><td>7</td><td></td><td></td></tr></table>			L	I	8				Y	7			<table border="1"><tr><td>1</td><td>3</td><td>8</td><td>8</td><td>9</td></tr></table>	1	3	8	8	9					
		L	I	8				Y	7														
1	3	8	8	9																			
j. Description of Waste: <u>Soil</u> <u>From surface water impoundments</u> <u>and bermed pit</u>	<table border="1"><tr><td>Quantity</td><td>Units</td><td>No.</td><td>TYPE</td></tr><tr><td><table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></td><td><table border="1"><tr><td></td><td></td><td></td><td></td></tr></table></td><td><table border="1"><tr><td>1</td></tr></table></td><td><table border="1"><tr><td>T</td></tr></table></td></tr></table>	Quantity	Units	No.	TYPE	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									<table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					<table border="1"><tr><td>1</td></tr></table>	1	<table border="1"><tr><td>T</td></tr></table>	T
Quantity	Units	No.	TYPE																				
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1																							
T																							
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.																							
Generator Authorized Agent Name <u>S. ROEDER</u>	Signature <u>[Signature]</u>																						
Shipment Date <u>12/10/07</u>																							

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

**TRANSPORTER I**

a. Name: <u>Reece Services, Inc.</u>	PRINT / TYPE
b. Address: <u>17756 Colonial Port RD.</u> <u>Dumfries, VA 22026</u>	
c. Driver Name/Title: _____	
d. Phone No.: <u>703-441-0999</u>	e. Truck No.: _____
f. Vehicle License No./State: <u>111-261 VA</u>	
Acknowledgement of Receipt of Materials.	
g. Driver Signature <u>[Signature]</u>	Shipment Date <u>12/10/07</u>

**TRANSPORTER II**

h. Name: <u>WR Services</u>	PRINT / TYPE
i. Address: _____	
j. Driver Name/Title: _____	
k. Phone No.: _____	l. Truck No.: _____
m. Vehicle License No./State: <u>111-261 VA</u>	
Acknowledgement of Receipt of Materials.	
n. Driver Signature <u>[Signature]</u>	Shipment Date <u>12/10/07</u>

**DESTINATION** (Generator completes a-d, destination site completes e-f)

a. Site Name: <u>King &amp; Queen Landfill</u>	c. Phone No.: <u>800-785-2146</u>
b. Physical Address: <u>4443 Iris RD</u> <u>Little Plymouth, VA 23091</u>	d. Mailing Address: <u>4443 Iris RD</u> <u>Little Plymouth, VA 23091</u>
e. Discrepancy Indication Space: _____	

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent _____	Signature _____	Receipt Date <u>12/10/07</u>
-----------------------------------	-----------------	------------------------------

**ASBESTOS** (Generator completes a-c, f-g; Operator completes d)

a. Operator's* Name: _____	b. Operator's* Phone No.: _____
c. Operator's* Address: _____	
d. Special Handling Instructions and additional information: _____	
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.	
e. Operator's Name & Title: _____	OPERATOR'S SIGNATURE _____
f. Name and Address of Responsible Agency: _____	
g. <input type="checkbox"/> Friable; <input type="checkbox"/> Non-friable; <input type="checkbox"/> Both _____ % friable _____ % non-friable	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.	



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

1336

## Section I

## GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
CONTAINERS  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

## TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

## TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
g. Driver Signature: \_\_\_\_\_  
Shipment Date: \_\_\_\_\_

## TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
n. Driver Signature: \_\_\_\_\_  
Shipment Date: \_\_\_\_\_

## Section III

## DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV

## ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL

2000

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers  
1 3 8 8 9

Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

k. Quantity: 

--	--	--	--	--	--

 Units: 

--	--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, If the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: 

--	--	--	--	--	--

 Shipment Date: 

--	--	--	--	--	--

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: 

--	--	--	--	--	--

 Shipment Date: 

--	--	--	--	--	--

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_  
Receipt Date: 

--	--	--	--	--	--

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE: \_\_\_\_\_ OPERATOR'S\* SIGNATURE: \_\_\_\_\_ Date: 

--	--	--	--	--	--

  
f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL  
2034

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
c. Address: 101 Columbia Road  
Morristown, NJ 07960

e. Phone No.: 973-455-6719  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_

i. BFI WASTE CODE 

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name Schneider Signature \_\_\_\_\_ Shipment Date 12/00/07

b. Generating Location: Former Allied Chemical - Front Royal  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

f. Phone No.: \_\_\_\_\_  
h. Owner's Phone No.: 752-1211

k. Containers 

1	3	8	8	5
---	---	---	---	---

  
Quantity 

		1	8
--	--	---	---

 Units 

4
---

 No. 

1
---

 TYPE 

T
---

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

SCRA  
METAL  
+  
PLASTIC

## Section II TRANSPORTER I (Transporter completes all of Section II)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No. 100358  
f. Vehicle License No./State: 32 626 VA  
Acknowledgement of Receipt of Materials.

g. Driver Signature \_\_\_\_\_ Shipment Date 12/01/10

## Section II TRANSPORTER II (Transporter completes all of Section II)

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## Section III DESTINATION (Destination completes all of Section III)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date \_\_\_\_\_

## Section IV ASBESTOS (Generator completes all of Section IV)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. *Scrap Metals* 2033 ORIGINAL

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal

c. Address: 101 Columbia Road  
Morristown, NJ 07960 d. Address: Kendrick Lane  
Front Royal, VA 22630 **Work Site**

e. Phone No.: 973-455-6719 f. Phone No.: Site 410 782 1311

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE 

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

 Containers 

1	3	8	8	9
---	---	---	---	---

j. Description of Waste: Soil k. Quantity 

			13	
--	--	--	----	--

 Units 

			Y	
--	--	--	---	--

 No. 

			1	
--	--	--	---	--

 TYPE 

			T	
--	--	--	---	--

**From surface water impoundments and bermed pit**

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name [Signature] Signature [Signature] Shipment Date 12/10/97

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II TRANSPORTER I (Generator completes a-d; Transporter completes e-g; and Driver completes h-i)

a. Name: Reece Services, Inc. h. Name: \_\_\_\_\_

b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026 i. Address: \_\_\_\_\_

c. Driver Name/Title: \_\_\_\_\_ j. Driver Name/Title: \_\_\_\_\_

d. Phone No.: 703-441-0999 e. Truck No.: 60353 k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: 32 1024 VA m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.

g. Driver Signature [Signature] Shipment Date 12/10/97 n. Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## Section III DESTINATION (Generator completes a-d; Destination Site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091 d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date 

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## Section IV ASBESTOS (Generator completes a-d; Operator completes e-f)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2032

**Section I****GENERATOR** (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

			L	I	8					Y	7		
--	--	--	---	---	---	--	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

--	--	--	--	--	--

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

**Section II****TRANSPORTER I**

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

PRINT / TYPE

e. Truck No.: \_\_\_\_\_

g. \_\_\_\_\_  
Driver Signature

Shipment Date

**TRANSPORTER II**

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

PRINT / TYPE

l. Truck No.: \_\_\_\_\_

n. \_\_\_\_\_  
Driver Signature

Shipment Date

**Section III****DESTINATION** (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_  
Name of Authorized Agent

Signature

Receipt Date

**Section IV****ASBESTOS** (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2031

**Section I** GENERATOR (Generator completes all of Section I)a. Generator Name: Honeywellc. Address: 101 Columbia Road  
Morristown, NJ 07960e. Phone No.: 973-455-6719

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8			Y	7		
--	--	---	---	---	--	--	---	---	--	--

j. Description of Waste: Soil

**From surface water impoundments  
and bermed pit**

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

b. Generating Location: Former Allied Chemical - Front Royald. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

f. Phone No.: \_\_\_\_\_

h. Owner's Phone No.: \_\_\_\_\_

1	3	8	8	9
---	---	---	---	---

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

k. Quantity

--	--	--	--	--	--	--	--	--	--	--

Units

No.

TYPE

--	--	--	--	--	--	--	--	--	--	--

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

1	2	1	0	0	7
---	---	---	---	---	---

Shipment Date

**Section II** TRANSPORTER Ia. Name: Reece Services, Inc.b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_

d. Phone No.: 703-441-0999

PRINT / TYPE

e. Truck No.: 7051f. Vehicle License No./State: 294916 VA  
Acknowledgement of Receipt of Materials.

g. Driver Signature

1	2	1	0	0	7
---	---	---	---	---	---

Shipment Date

**Section II** TRANSPORTER II

h. Name: \_\_\_\_\_

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_

k. Phone No.: \_\_\_\_\_

PRINT / TYPE

l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

--	--	--	--	--	--

Shipment Date

**Section III** DESTINATION (Generator completes a, d, destination site completes b, c)a. Site Name: King & Queen Landfillb. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091c. Phone No.: 800-785-2146d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

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Receipt Date

**Section IV** ASBESTOS (Generator completes a, b, c, d, operator completes e, f, g)

a. Operator's\* Name: \_\_\_\_\_

b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name &amp; Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date

f. Name and Address  
of Responsible Agency: \_\_\_\_\_g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2030

**Section I** GENERATOR (Generator completes all of Section I)a. Generator Name: Honeywellc. Address: 101 Columbia Road  
Morristown, NJ 07960e. Phone No.: 973-455-6719

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8			Y	7		
--	--	---	---	---	--	--	---	---	--	--

j. Description of Waste: SoilFrom surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

b. Generating Location: Former Allied Chemical - Front Royald. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

f. Phone No.: \_\_\_\_\_

h. Owner's Phone No.: 410 982 1311

1	3	8	8	9
---	---	---	---	---

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

k. Quantity Units No. TYPE

			1	2	4		1	T
--	--	--	---	---	---	--	---	---

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

1	2	1	0	0	7
---	---	---	---	---	---

Shipment Date

**Section II** TRANSPORTER I (Transporter completes all of Section II)a. Name: Reece Services, Inc.b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_

PRINT / TYPE

d. Phone No.: 703-441-0999e. Truck No.: 104f. Vehicle License No./State: 29345 R  
Acknowledgement of Receipt of Materials.g. \_\_\_\_\_  
Driver Signature

1	2	1	0	0	7
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Shipment Date

**Section II** TRANSPORTER II (Transporter completes all of Section II)

h. Name: \_\_\_\_\_

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_

PRINT / TYPE

k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.n. \_\_\_\_\_  
Driver Signature

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Shipment Date

**Section III** DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kk, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)a. Site Name: King & Queen Landfillb. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091c. Phone No.: 800-785-2146d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_  
Name of Authorized Agent

Signature

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Receipt Date

**Section IV** ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kk, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

a. Operator's\* Name: \_\_\_\_\_

b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name &amp; Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date

f. Name and Address  
of Responsible Agency: \_\_\_\_\_g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2029

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
g. Owner's Name:  
h. Owner's Phone No.:  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No.: 

1
---

 TYPE: 

T
---

  
Containers: 

--	--	--	--	--

  
TYPE:  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
UNITS:  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
Generator Authorized Agent Name: [Signature] Signature: [Signature] Shipment Date: 12/10/17

## Section II TRANSPORTER I (Transporter completes I & II, Transporter II completes I & II)

## TRANSPORTER II

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: [Signature]  
d. Phone No.: 703-441-0999  
e. Truck No.: 90399  
f. Vehicle License No./State: VT 903  
g. Driver Signature: [Signature] Shipment Date: 12/10/17  
h. Name:  
i. Address:  
j. Driver Name/Title:  
k. Phone No.:  
l. Truck No.:  
m. Vehicle License No./State:  
n. Driver Signature: [Signature] Shipment Date: [Signature]

## Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
f. Name of Authorized Agent: [Signature] Signature: [Signature] Receipt Date: [Signature]

## Section IV ASBESTOS (Generator completes a-d, f-g; Operator completes e)

a. Operator's\* Name:  
b. Operator's\* Phone No.:  
c. Operator's\* Address:  
d. Special Handling Instructions and additional information:  
e. Operator's Name & Title: [Signature] OPERATOR'S\* SIGNATURE: [Signature] Date: [Signature]  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both        % friable        % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2028

**Section I GENERATOR** (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630 **Work Site**  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: 410-752-1311  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
Containers: 

1	3	8	8	9
---	---	---	---	---

  
k. Quantity: 

			1	3	8	8	9
--	--	--	---	---	---	---	---

 Units: 

			Y
--	--	--	---

 No.: 

		1
--	--	---

 TYPE: 

	T
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Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: CHARTER Signature: \_\_\_\_\_ Shipment Date: 

1	2	1	0	0	7
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TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

**Section II TRANSPORTER** (Generator Completes a-d; transporter completes e-g; Transporter II completes h-n)**TRANSPORTER I**

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 PRINT / TYPE: 40010  
e. Truck No.: 59920 VA  
f. Vehicle License No./State: 59920 VA  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: \_\_\_\_\_ Shipment Date: 

1	2	1	0	0	7
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**TRANSPORTER II**

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: \_\_\_\_\_ Shipment Date: 

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**Section III DESTINATION** (Generator Completes a-d; destination site completes e-g)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

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**Section IV ASBESTOS** (Generator Completes a-d; g; Operator completes e-f)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE: \_\_\_\_\_ OPERATOR'S SIGNATURE: \_\_\_\_\_ Date: 

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f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

027 ORIGINAL

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
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j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Containers  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## Section II TRANSPORTER (Generator Completes a-d, transporter completes e-g, transporter II completes h-n)

TRANSPORTER I  
a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
g. \_\_\_\_\_  
Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

TRANSPORTER II  
h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
n. \_\_\_\_\_  
Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_  
Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date \_\_\_\_\_

## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. \_\_\_\_\_

ORIGINAL

025

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8			Y	7		
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j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers  
k. Quantity: 

1	3	8	8	9
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Units: 

--	--	--	--	--

  
No.: 

1
---

  
TYPE: 

T
---

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
g. Driver Signature: \_\_\_\_\_  
Shipment Date: 

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### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
n. Driver Signature: \_\_\_\_\_  
Shipment Date: 

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## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_  
Signature: \_\_\_\_\_

Receipt Date: 

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## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2026

**Section I GENERATOR** (Generator completes all of Section I)

a. Generator Name: Honeywell  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
e. Phone No.: 973-455-6719  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8			Y	7		
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j. Description of Waste: Soil  
From surface water impoundments and bermed pit  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residus of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name UNKOWN Signature \_\_\_\_\_ Shipment Date 12/10/07  
b. Generating Location: Former Allied Chemical - Front Royal  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
f. Phone No.: \_\_\_\_\_  
h. Owner's Phone No.: 410 782 1211  
Containers 

1	3	8	8	9
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 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
k. Quantity 

			15	
--	--	--	----	--

 Units 

T
---

 No. 

1
---

 TYPE 

T
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**Section II TRANSPORTER I**

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: 92911  
f. Vehicle License No./State: 299 617 P VA  
Acknowledgement of Receipt of Materials.  
g. Driver Signature [Signature] Shipment Date 12/10/07

**Section II TRANSPORTER II**

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

**Section III DESTINATION** (Generator completes a destination; transporter completes b.)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date 

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**Section IV ASBESTOS** (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kk, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S SIGNATURE \_\_\_\_\_ Date 

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f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL  
2024

## SECTION I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: 410 702 1311  
i. BFI WASTE CODE 

		L	I	8			Y	7		
--	--	---	---	---	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity 

1	3	8	8	9
---	---	---	---	---

 Units 

1	B	T
---	---	---

 No. 

1
---

 TYPE 

T
---

  
Containers 

1	3	8	8	9
---	---	---	---	---

  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name [Signature] Signature [Signature] Shipment Date 12/04/07

## SECTION II TRANSPORTER I (Generator completes a-d; Transporter completes e-g; Transporter II completes h-j)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: 60165  
f. Vehicle License No./State: 118452 VA  
Acknowledgement of Receipt of Materials.  
g. [Signature] 12/04/07  
Driver Signature Shipment Date  
h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. \_\_\_\_\_  
Driver Signature Shipment Date

## SECTION III DESTINATION (Generator completes a-c; Destination Site completes d-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. \_\_\_\_\_  
Name of Authorized Agent Signature \_\_\_\_\_ Receipt Date 12/04/07

## SECTION IV ASBESTOS (Generator completes a-d; Operator completes e-g)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. \_\_\_\_\_

ORIGINAL

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
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j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
k. Quantity 

--	--	--	--	--	--

 Units 

--	--	--	--	--	--

 No. 

		1	
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 TYPE 

		T	
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GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name \_\_\_\_\_

Signature \_\_\_\_\_

Shipment Date 

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## Section II TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature 

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 Shipment Date 

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### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature 

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 Shipment Date 

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## Section III DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_

Receipt Date 

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## Section IV ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE 

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 Date \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

1022

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8			Y	7		
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j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

k. Quantity \_\_\_\_\_ Units \_\_\_\_\_ No. 1 TYPE T

Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 8 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

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Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

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Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

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Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date

f. Name and Address  
of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2021

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

			L	I	8			Y	7

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 


 Units: 


 No.: 

			1		

 TYPE: 

			T		

  
Containers: 


  
TYPE:  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
UNITS:  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d. Transporter completes e-g. Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
g. Driver Signature: 


 Shipment Date: 


#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
n. Driver Signature: 


 Shipment Date: 


## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_  
Receipt Date: 


## Section IV

### ASBESTOS (Generator Completes a-d, f-g. Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE: \_\_\_\_\_ OPERATOR'S\* SIGNATURE: \_\_\_\_\_ Date: 


  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2020

## Section I

## GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
 c. Address: 101 Columbia Road  
Morristown, NJ 07960  
 e. Phone No.: 973-455-6719  
 If owner of the generating facility differs from the generator, provide:  
 g. Owner's Name: \_\_\_\_\_  
 h. Owner's Phone No.: \_\_\_\_\_  
 i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
 j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

b. Generating Location: Former Allied Chemical - Front Royal  
 d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

f. Phone No.: \_\_\_\_\_

h. Owner's Phone No.: \_\_\_\_\_

1	3	8	8	9
---	---	---	---	---

Containers

TYPE

DM - METAL DRUM  
 DP - PLASTIC DRUM  
 B - BAG  
 BA - 6 MIL. PLASTIC BAG  
 or WRAP  
 T - TRUCK  
 O - OTHER

k. Quantity: 

--	--	--	--	--

 Units: 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

UNITS

P - POUNDS  
 Y - YARDS  
 M<sup>3</sup> - CUBIC METERS  
 Y<sup>3</sup> - CUBIC YARDS  
 O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

## TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

## TRANSPORTER I

a. Name: Reece Services, Inc.  
 b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
 c. Driver Name/Title: \_\_\_\_\_  
 d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
 f. Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials.

g. \_\_\_\_\_  
 Driver Signature

Shipment Date

## TRANSPORTER II

h. Name: \_\_\_\_\_  
 i. Address: \_\_\_\_\_  
 j. Driver Name/Title: \_\_\_\_\_  
 k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
 m. Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials.

n. \_\_\_\_\_  
 Driver Signature

Shipment Date

## Section III

## DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
 b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
 c. Phone No.: 800-785-2146  
 d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
 e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_  
 Name of Authorized Agent Signature

Receipt Date

## Section IV

## ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 c. Operator's\* Address: \_\_\_\_\_  
 d. Special Handling Instructions and additional information: \_\_\_\_\_  
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
 e. Operator's Name & Title: \_\_\_\_\_  
 f. Name and Address of Responsible Agency: \_\_\_\_\_  
 g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
 \*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2019

**Section I****GENERATOR** (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

j. Description of Waste: Soil

From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

1	3	8	8	9
---	---	---	---	---

Containers

Quantity	Units	No.	TYPE
		1	T

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

**Section II****TRANSPORTER** (Generator Completes a-d, transporter completes e-g, transporter II completes h-n)**TRANSPORTER I**

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

**TRANSPORTER II**

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

**Section III****DESTINATION** (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

**Section IV****ASBESTOS** (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name &amp; Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date

f. Name and Address  
of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETURN - PINK - GENERATOR RETURN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

1018

**Section I****GENERATOR** (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9
---	---	---	---	---

 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

**Section II****TRANSPORTER** (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)**TRANSPORTER I****TRANSPORTER II**

a. Name: Reece Services, Inc. h. Name: \_\_\_\_\_  
b. Address: 17756 Colonial Port RD. i. Address: \_\_\_\_\_  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_ j. Driver Name/Title: \_\_\_\_\_  
PRINT / TYPE PRINT / TYPE  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_ k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_ m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.  
g. Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_ n. Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

**Section III****DESTINATION** (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_  
Receipt Date \_\_\_\_\_

**Section IV****ASBESTOS** (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2017

**Section I****GENERATOR** (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9
---	---	---	---	---

 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity 

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 Units 

--

 No. 

1
---

 TYPE 

T
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GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

**Section II****TRANSPORTER** (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-i)**TRANSPORTER I****TRANSPORTER II**

a. Name: Reece Services, Inc. h. Name: \_\_\_\_\_  
b. Address: 17756 Colonial Port RD. i. Address: \_\_\_\_\_  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_ j. Driver Name/Title: \_\_\_\_\_  
PRINT / TYPE PRINT / TYPE  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_ k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_ m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.  
g. Driver Signature 

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 Shipment Date n. Driver Signature 

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 Shipment Date

**Section III****DESTINATION** (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent 

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 Signature 

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 Receipt Date

**Section IV****ASBESTOS** (Generator Completes a-d, 1-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE OPERATOR'S\* SIGNATURE 

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 Date  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 7001

**Section I****GENERATOR** (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630

e. Phone No.: 973-455-6719

f. Phone No.: \_\_\_\_\_

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

1	3	8	8	9
---	---	---	---	---

Containers

j. Description of Waste: SoilFrom surface water impoundments  
and bermed pit

Quantity	Units	No.	TYPE
		1	T

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.**

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UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

**Section II****TRANSPORTER** (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n.)**TRANSPORTER I**

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_

d. Phone No.: 703-441-0999

PRINT / TYPE

e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. \_\_\_\_\_  
Driver Signature

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Shipment Date

**TRANSPORTER II**

h. Name: \_\_\_\_\_

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_

k. Phone No.: \_\_\_\_\_

PRINT / TYPE

l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. \_\_\_\_\_  
Driver Signature

--	--	--	--	--

Shipment Date

**Section III****DESTINATION** (Generator Completes a-d, destination site completes e-f)a. Site Name: King & Queen Landfillc. Phone No.: 800-785-2146

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_  
Name of Authorized Agent

Signature

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Receipt Date

**Section IV****ASBESTOS** (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name &amp; Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date

f. Name and Address  
of Responsible Agency: \_\_\_\_\_g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: **Honeywell**  
b. Generating Location: **Former Allied Chemical - Front Royal**  
c. Address: **101 Columbia Road**  
**Morristown, NJ 07960**  
d. Address: **Kendrick Lane**  
**Front Royal, VA 22630**  
e. Phone No.: **973-455-6719**  
f. Phone No.:  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name:  
h. Owner's Phone No.:  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: **Soil**  
**From surface water impoundments and bermed pit**

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: **Reece Services, Inc.**  
b. Address: **17756 Colonial Port RD.**  
**Dumfries, VA 22026**  
c. Driver Name/Title:  
d. Phone No.: **703-441-0999**  
e. Truck No.:  
f. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
g. Driver Signature

PRINT / TYPE

e. Truck No.:

Shipment Date

#### TRANSPORTER II

h. Name:  
i. Address:  
j. Driver Name/Title:  
k. Phone No.:  
l. Truck No.:  
m. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
n. Driver Signature

PRINT / TYPE

i. Truck No.:

Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: **King & Queen Landfill**  
b. Physical Address: **4443 Iris RD**  
**Little Plymouth, VA 23091**  
c. Phone No.: **800-785-2146**  
d. Mailing Address: **4443 Iris RD**  
**Little Plymouth, VA 23091**  
e. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name:  
b. Operator's\* Phone No.:  
c. Operator's\* Address:  
d. Special Handling Instructions and additional information:  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title:  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both % friable % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: **Honeywell** b. Generating Location: **Former Allied Chemical - Front Royal**  
c. Address: **101 Columbia Road** d. Address: **Kendrick Lane** **Work Site**  
**Morristown, NJ 07960** **Front Royal, VA 22630**

e. Phone No.: **973-455-6719**

f. Phone No.: \_\_\_\_\_

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

1	3	8	8	9
---	---	---	---	---

Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

j. Description of Waste: **Soil**

k. Quantity \_\_\_\_\_ Units \_\_\_\_\_ No. **1** TYPE **T**

**From surface water impoundments  
and bermed pit**

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: **Reece Services, Inc.**  
b. Address: **17756 Colonial Port RD.**  
**Dumfries, VA 22026**

c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: **703-441-0999** e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. \_\_\_\_\_  
Driver Signature

Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. \_\_\_\_\_  
Driver Signature

Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: **King & Queen Landfill** c. Phone No.: **800-785-2146**  
b. Physical Address: **4443 Iris RD** d. Mailing Address: **4443 Iris RD**  
**Little Plymouth, VA 23091** **Little Plymouth, VA 23091**

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_  
Name of Authorized Agent Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_  
PRINT / TYPE OPERATOR'S\* SIGNATURE

f. Name and Address  
of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

1005

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: **Honeywell** b. Generating Location: **Former Allied Chemical - Front Royal**  
c. Address: **101 Columbia Road** d. Address: **Kendrick Lane** **Work Site**  
**Morristown, NJ 07960** **Front Royal, VA 22630**

e. Phone No.: **973-455-6719**

f. Phone No.: \_\_\_\_\_

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

1	3	8	8	9
---	---	---	---	---

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

j. Description of Waste: **Soil**

**From surface water impoundments  
and bermed pit**

k. Quantity				Units	No.	TYPE
					1	T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: **Reece Services, Inc.**  
b. Address: **17756 Colonial Port RD.**  
**Dumfries, VA 22026**

c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: **703-441-0999** e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: **King & Queen Landfill** c. Phone No.: **800-785-2146**  
b. Physical Address: **4443 Iris RD** d. Mailing Address: **4443 Iris RD**  
**Little Plymouth, VA 23091** **Little Plymouth, VA 23091**

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

i. Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date

f. Name and Address  
of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2121 ORIGINAL

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: **Honeywell**  
b. Generating Location: **Former Allied Chemical - Front Royal**  
c. Address: **101 Columbia Road**  
**Morristown, NJ 07960**  
d. Address: **Kendrick Lane** **Work Site**  
**Front Royal, VA 22630**  
e. Phone No.: **973-455-6719**  
f. Phone No.:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: **410 752 1311**  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: **Soil**  
**From surface water impoundments and bermed pit**  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: **E. Schneider** Signature: \_\_\_\_\_ Shipment Date: **12-02-07**  
Containers: 

1	3	8	8	9
---	---	---	---	---

 TYPE: 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

  
UNITS: 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

## Section II TRANSPORTER (Transporter completes a-d, transporter completes a-d, transporter completes a-d)

a. Name: **Reece Services, Inc.**  
b. Address: **17756 Colonial Port RD.**  
**Dumfries, VA 22026**  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: **703-441-0999**  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
g. Driver Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_  
h. Name: **Reece Services**  
i. Address: **9600 Newland Road**  
**Springfield, VA 22150**  
j. Driver Name/Title: **John P. Reece**  
k. Phone No.: **703-441-0999**  
l. Truck No.: **1212**  
m. Vehicle License No./State: **PT 12**  
n. Driver Signature: \_\_\_\_\_ Shipment Date: **12-02-07**

## Section III DESTINATION (Generator completes a-d, destination site completes a-f)

a. Site Name: **King & Queen Landfill**  
b. Physical Address: **4443 Iris RD**  
**Little Plymouth, VA 23091**  
c. Phone No.: **800-785-2146**  
d. Mailing Address: **4443 Iris RD**  
**Little Plymouth, VA 23091**  
e. Discrepancy Indication Space: \_\_\_\_\_  
f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

## Section IV ASBESTOS (Generator completes a-d, f-g; Operator completes a)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2122

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name:  
h. Owner's Phone No.: 410 182 1211  
i. BFI WASTE CODE  

		L	I	8			Y	7		
--	--	---	---	---	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity  

				18						
--	--	--	--	----	--	--	--	--	--	--

  
Containers  

1	3	8	8	9	
---	---	---	---	---	--

  
No. TYPE  

		1		T
--	--	---	--	---

  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
Generator Authorized Agent Name E. ROEDER Signature [Signature] Shipment Date 120507

## Section II TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title:  
d. Phone No.: 703-441-0999  
e. Truck No.: 7648  
f. Vehicle License No./State: 99245  
Acknowledgement of Receipt of Materials.  
g. Driver Signature [Signature] Shipment Date 120507

## Section II TRANSPORTER II

h. Name:  
i. Address:  
j. Driver Name/Title:  
k. Phone No.:  
l. Truck No.:  
m. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
n. Driver Signature [Signature] Shipment Date [Signature]

## Section III DESTINATION (Generator completes a, d, destination site completes b, c)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent [Signature] Signature [Signature] Receipt Date [Signature]

## Section IV ASBESTOS (Generator completes a, b, c, Operator completes d, e)

a. Operator's\* Name:  
b. Operator's\* Phone No.:  
c. Operator's\* Address:  
d. Special Handling Instructions and additional information:  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Signature] PRINT / TYPE OPERATOR'S\* SIGNATURE [Signature] Date [Signature]  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both [Signature] % friable [Signature] % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2324 ORIGINAL

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
g. Owner's Name:  
h. Owner's Phone No.: 910 782 1311  
i. BFI WASTE CODE 

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name B. Schroeder Signature [Signature] Shipment Date 120307  
Containers 

1	3	8	8	9
---	---	---	---	---

  
k. Quantity 

			10	Y
--	--	--	----	---

 Units 

			1	T
--	--	--	---	---

 No. 

			1	T
--	--	--	---	---

 TYPE  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II TRANSPORTER I (Generator completes a-d; transporter completes e-g; jammed data, complete f-g)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: [Signature]  
d. Phone No.: 703-441-0999  
e. Truck No.:  
f. Vehicle License No./State: 27624 VA  
Acknowledgement of Receipt of Materials.  
g. Driver Signature [Signature] Shipment Date 120307  
h. Name:  
i. Address:  
j. Driver Name/Title: [Signature]  
k. Phone No.:  
l. Truck No.:  
m. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
n. Driver Signature [Signature] Shipment Date [Signature]

## Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent [Signature] Signature [Signature] Receipt Date [Signature]

## Section IV ASBESTOS (Generator completes a-d; operator completes e-g)

a. Operator's\* Name:  
b. Operator's\* Phone No.:  
c. Operator's\* Address:  
d. Special Handling Instructions and additional information:  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Signature] PRINT / TYPE OPERATOR'S\* SIGNATURE [Signature] Date [Signature]  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both [Signature] % friable [Signature] % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL  
1120

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630

e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8			Y	7		
--	--	---	---	---	--	--	---	---	--	--

1	3	8	8	9
---	---	---	---	---

Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

j. Description of Waste: Soil

From surface water impoundments  
and bermed pit

Quantity	Units	No.	TYPE
		1	T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, transporter completes e-g, transporter II completes h-n)

#### TRANSPORTER I

#### TRANSPORTER II

a. Name: Reece Services, Inc. h. Name: \_\_\_\_\_  
b. Address: 17756 Colonial Port RD. i. Address: \_\_\_\_\_  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_ j. Driver Name/Title: \_\_\_\_\_  
PRINT / TYPE PRINT / TYPE  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_ k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_ m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.

g. \_\_\_\_\_ n. \_\_\_\_\_  
Driver Signature Shipment Date Driver Signature Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_ g. \_\_\_\_\_  
Name of Authorized Agent Signature Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, I-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ f. OPERATOR'S SIGNATURE \_\_\_\_\_  
PRINT / TYPE Date

g. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2126 ORIGINAL

## Section I GENERATOR (Generator Completes all of Section I)

a. Generator Name: <u>Honeywell</u>	b. Generating Location: <u>Former Allied Chemical - Front Royal</u>																																																															
c. Address: <u>101 Columbia Road</u> <u>Morristown, NJ 07960</u>	d. Address: <u>Kendrick Lane</u> <u>Work Site</u> <u>Front Royal, VA 22630</u>																																																															
e. Phone No.: <u>973-455-6719</u>	f. Phone No.: _____																																																															
If owner of the generating facility differs from the generator, provide:																																																																
g. Owner's Name: _____	h. Owner's Phone No.: <u>910 782 1311</u>																																																															
i. BFI WASTE CODE	Containers																																																															
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		L	I	8																																																												
1	3	8	8	9																																																												
j. Description of Waste: <u>Soil</u> <u>From surface water impoundments</u> <u>and bermed pit</u>	<table border="1"><tr><td>Quantity</td><td>Units</td><td>No.</td><td>TYPE</td></tr><tr><td><table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></td><td><table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></td><td><table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></td><td><table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></td></tr></table>	Quantity	Units	No.	TYPE	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											<table border="1"><tr><td>DM - METAL DRUM</td><td>TYPE</td></tr><tr><td>DP - PLASTIC DRUM</td><td></td></tr><tr><td>B - BAG</td><td></td></tr><tr><td>BA - 6 MIL. PLASTIC BAG</td><td></td></tr><tr><td>or WRAP</td><td></td></tr><tr><td>T - TRUCK</td><td></td></tr><tr><td>O - OTHER</td><td></td></tr></table>	DM - METAL DRUM	TYPE	DP - PLASTIC DRUM		B - BAG		BA - 6 MIL. PLASTIC BAG		or WRAP		T - TRUCK		O - OTHER	
Quantity	Units	No.	TYPE																																																													
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GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.																																																																
Generator Authorized Agent Name: <u>E. SCHARLEDER</u>	Signature: <u>[Signature]</u>																																																															
Shipment Date: <u>12/2/07</u>																																																																

## Section II TRANSPORTER (Generator Completes a-d; Transporter completes e-g; Transporter II completes h-i)

### TRANSPORTER I

a. Name: <u>Reece Services, Inc.</u>	
b. Address: <u>17756 Colonial Port RD.</u> <u>Dumfries, VA 22026</u>	
c. Driver Name/Title: _____	
d. Phone No.: <u>703-441-0999</u>	
e. Truck No.: _____	
f. Vehicle License No./State: <u>43502 P VA</u>	
Acknowledgement of Receipt of Materials.	
g. Driver Signature: <u>[Signature]</u>	
Shipment Date: <u>12/02/07</u>	

### TRANSPORTER II

h. Name: _____	
i. Address: _____	
j. Driver Name/Title: _____	
k. Phone No.: _____	
l. Truck No.: _____	
m. Vehicle License No./State: _____	
Acknowledgement of Receipt of Materials.	
n. Driver Signature: _____	
Shipment Date: _____	

## Section III DESTINATION (Generator Completes a-d; Destination completes e-g)

a. Site Name: <u>King &amp; Queen Landfill</u>	c. Phone No.: <u>800-785-2146</u>
b. Physical Address: <u>4443 Iris RD</u> <u>Little Plymouth, VA 23091</u>	d. Mailing Address: <u>4443 Iris RD</u> <u>Little Plymouth, VA 23091</u>
e. Discrepancy Indication Space: _____	

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____	Signature: _____	Receipt Date: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						

## Section IV ASBESTOS (Generator Completes a-d; Operator completes e-g)

a. Operator's* Name: _____	b. Operator's* Phone No.: _____						
c. Operator's* Address: _____							
d. Special Handling Instructions and additional information: _____							
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.							
e. Operator's Name & Title: _____	Operator's* Signature: _____						
f. Name and Address of Responsible Agency: _____	Date: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
g. <input type="checkbox"/> Friable; <input type="checkbox"/> Non-friable; <input type="checkbox"/> Both _____ % friable _____ % non-friable							
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.							



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2127

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name:  
h. Owner's Phone No.: 410 782 1231  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No.: 

1
---

 TYPE: 

T
---

  
CONTAINERS TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: E. SCHARFEDER Signature: [Signature] Shipment Date: 

1	2	0	3	0	7
---	---	---	---	---	---

## Section II TRANSPORTER (Generator completes a-d; transporter completes e-g; transporter II completes h-j)

TRANSPORTER I  
a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: [Signature]  
d. Phone No.: 703-441-0999 e. Truck No.:  
f. Vehicle License No./State: [Signature]  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: [Signature] Shipment Date: 

1	2	0	3	0	7
---	---	---	---	---	---

  
TRANSPORTER II  
h. Name: RZ Trucking  
i. Address:  
j. Driver Name/Title: [Signature]  
k. Phone No.: 703-441-0999 l. Truck No.: 9912  
m. Vehicle License No./State: 26523 P  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: [Signature] Shipment Date: 

1	2	0	3	0	7
---	---	---	---	---	---

## Section III DESTINATION (Generator completes a-d; destination site completes e-g)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: [Signature] Signature: [Signature] Receipt Date: 

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## Section IV ASBESTOS (Generator completes a-d; Asbestos Operator completes e-g)

a. Operator's\* Name: [Signature]  
b. Operator's\* Phone No.: [Signature]  
c. Operator's\* Address: [Signature]  
d. Special Handling Instructions and additional information: [Signature]  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Signature] PRINT / TYPE: [Signature] OPERATOR'S\* SIGNATURE: [Signature] Date: 

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f. Name and Address of Responsible Agency: [Signature]  
g. ☐ Friable; ☐ Non-friable; ☐ Both [Signature] % friable [Signature] % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2128

**Section I GENERATOR** (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.:  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name:  
h. Owner's Phone No.: 410 182 1201  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

1	2	0	7
---	---	---	---

 No.: 

1			
---	--	--	--

 TYPE: 

T			
---	--	--	--

  
CONTAINERS  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
C. S. [Signature]  
Generator Authorized Agent Name Signature Shipment Date 120307

**Section II TRANSPORTER I**

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title:  
d. Phone No.: 703-441-0999 e. Truck No.:  
f. Vehicle License No./State:  
Acknowledgement of Receipt of Materials.  
g. Driver Signature [Signature] Shipment Date 120307

**Section II TRANSPORTER II**

h. Name: JAMES WILLIAMS  
i. Address: 100 N. 4th St  
j. Driver Name/Title:  
k. Phone No.: 703-441-0999 l. Truck No.: 10711  
m. Vehicle License No./State: 316-1233617 F  
Acknowledgement of Receipt of Materials.  
n. Driver Signature [Signature] Shipment Date 120307

**Section III DESTINATION** (Generator completes 1-3, destination site completes 4-5)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space:

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent [Signature] Receipt Date 120307

**Section IV ASBESTOS** (Generator completes 1-3, Operator completes 4-5)

a. Operator's\* Name:  
b. Operator's\* Phone No.:  
c. Operator's\* Address:  
d. Special Handling Instructions and additional information:  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: [Signature] OPERATOR'S SIGNATURE [Signature] Date 120307  
f. Name and Address of Responsible Agency:  
g. ☐ Friable; ☐ Non-friable; ☐ Both          % friable          % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630

e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8				Y	7		
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1	3	8	8	9
---	---	---	---	---

Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

k. Quantity \_\_\_\_\_ Units \_\_\_\_\_ No. 1 TYPE T

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional Information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2130

ORIGINAL  
ORIGINAL

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: 703-455-6719  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No.: 

1
---

 TYPE: 

T
---

  
CONTAINERS: 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
or WRAP
T - TRUCK
O - OTHER

  
UNITS: 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name: EDWARD E. BUCK Signature: \_\_\_\_\_ Shipment Date: 12/20/07

## TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: 415 F16 VA  
Acknowledgement of Receipt of Materials.  
g. Driver Signature: \_\_\_\_\_ Shipment Date: 12/20/07

## TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_

## Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kk, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

## Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kk, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2131

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
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j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

1	2	0	0	7
---	---	---	---	---

 No.: 

1				
---	--	--	--	--

 TYPE: 

T				
---	--	--	--	--

  
Containers: 

DM - METAL DRUM	TYPE
DP - PLASTIC DRUM	
B - BAG	
BA - 6 MIL. PLASTIC BAG	
or WRAP	
T - TRUCK	
O - OTHER	

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
E. Schaefer  
Generator Authorized Agent Name Signature  
120507  
Shipment Date

## Section II TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
g. Driver Signature: George N. Nicksa  
Shipment Date: 120507

## Section II TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
n. Driver Signature: \_\_\_\_\_  
Shipment Date: \_\_\_\_\_

## Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
f. Name of Authorized Agent: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Receipt Date: 120507

## Section IV ASBESTOS (Generator completes a-d; Operator completes e-f)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

1132

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
k. Quantity 

--	--	--	--	--	--

 Units 

--	--	--	--	--	--

 No. 

		1	
--	--	---	--

 TYPE 

		T	
--	--	---	--

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

PRINT / TYPE

e. Truck No.: \_\_\_\_\_

g. \_\_\_\_\_  
Driver Signature

Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

PRINT / TYPE

l. Truck No.: \_\_\_\_\_

n. \_\_\_\_\_  
Driver Signature

Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_  
Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

PRINT / TYPE

OPERATOR'S SIGNATURE

Date

DESTINATION RETURN - WHITE - RETURN TO GENERATOR - GREEN - RETURN TO OPERATOR - YELLOW - TRANSPORTER RETAIN - PINK - GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST <sup>ORIGINAL</sup>

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2133

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: 404-752-1311  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers  
k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II TRANSPORTER (Generator completes a-d; Transporter completes e-g; Transporee completes h-j)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: 71552 VA  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV ASBESTOS (Generator completes a-d; Operator completes e-f)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL  
2134

## SECTION I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: 410 756 1211  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity 

1	3	8	8	9
---	---	---	---	---

 Units 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
Containers 

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

  
UNITs 

P - POUNDS
Y - YARDS
M <sup>3</sup> - CUBIC METERS
Y <sup>3</sup> - CUBIC YARDS
O - OTHER

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date 12/20/97

## SECTION II TRANSPORTER I (Transporter completes all of Section II)

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: 1P9871 VA  
Acknowledgement of Receipt of Materials.  
g. Driver Signature \_\_\_\_\_ Shipment Date 12/20/97

## SECTION II TRANSPORTER II (Transporter completes all of Section II)

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## SECTION III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
f. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date 

--	--	--	--	--

## SECTION IV ASBESTOS (Generator completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date 

--	--	--	--	--

  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2135

## Section I

## GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9
---	---	---	---	---

 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity 

--	--	--	--	--

 Units 

--

 No. 

1
---

 TYPE 

T
---

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

## TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

## TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

## TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III

## DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV

## ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name &amp; Title: \_\_\_\_\_

PRINT / TYPE

OPERATOR'S\* SIGNATURE

Date

f. Name and Address  
of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
e. Phone No.: 973-455-6719  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_  
h. Owners Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

b. Generating Location: Former Allied Chemical - Front Royal  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
f. Phone No.: \_\_\_\_\_

k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

--	--	--	--	--

 No.: 

1
---

 TYPE: 

T
---

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature: \_\_\_\_\_ Shipment Date: 

--	--	--	--	--

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature: \_\_\_\_\_ Shipment Date: 

--	--	--	--	--

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

--	--	--	--	--

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE: \_\_\_\_\_ OPERATOR'S\* SIGNATURE: \_\_\_\_\_ Date: 

--	--	--	--	--

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both: \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2137

## GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: 410 782 1311  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9
---	---	---	---	---

 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity 

				1	5	4
--	--	--	--	---	---	---

 Units 

				1
--	--	--	--	---

 No. 

				1
--	--	--	--	---

 TYPE 

				T
--	--	--	--	---

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name [Signature] Signature [Signature] Shipment Date 12/27/97

## Section II TRANSPORTER (Generator completes and transporter completes and transporter completes)

### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. [Signature] 1/2/98 4/2/98 07  
Driver Signature Shipment Date

### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. \_\_\_\_\_  
Driver Signature Shipment Date

## Section III DESTINATION (Generator completes and destination also completes)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. \_\_\_\_\_  
Name of Authorized Agent Signature Receipt Date

## Section IV ASBESTOS (Generator completes and operator completes)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S SIGNATURE \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN - WHITE • RETURN TO GENERATOR - GREEN • RETURN TO OPERATOR - YELLOW • TRANSPORTER RETAIN - PINK • GENERATOR RETAIN - GOLD



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2138

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
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j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2139

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell  
 c. Address: 101 Columbia Road  
Morristown, NJ 07960  
 e. Phone No.: 973-455-6719  
 If owner of the generating facility differs from the generator, provide:  
 g. Owner's Name: \_\_\_\_\_  
 i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
 j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
 k. Quantity: 

1	3	8	8	9
---	---	---	---	---

 Units: 

1	5	7
---	---	---

 No.: 

1
---

 TYPE: 

T
---

  
 f. Generating Location: Former Allied Chemical - Front Royal  
 d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
 f. Phone No.: \_\_\_\_\_  
 h. Owner's Phone No.: 410 782 1311  
 Containers: 

DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

  
 GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
 Generator Authorized Agent Name: [Signature] Signature: [Signature] Shipment Date: 12/02/07

## Section II TRANSPORTER (Generator completes a and b; Transporter completes c-j)

a. Name: Reece Services, Inc.  
 b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
 c. Driver Name/Title: \_\_\_\_\_  
 d. Phone No.: 703-441-0999  
 e. Truck No.: \_\_\_\_\_  
 f. Vehicle License No./State: AB 6058  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 g. Driver Signature: [Signature] Shipment Date: 12/02/07  
 h. Name: \_\_\_\_\_  
 i. Address: \_\_\_\_\_  
 j. Driver Name/Title: \_\_\_\_\_  
 k. Phone No.: \_\_\_\_\_  
 l. Truck No.: \_\_\_\_\_  
 m. Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 n. Driver Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_

## Section III DESTINATION (Generator completes a and b; destination site completes c-j)

a. Site Name: King & Queen Landfill  
 b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
 c. Phone No.: 800-785-2146  
 d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
 e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

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## Section IV ASBESTOS (Generator completes a and b; Operator completes c-j)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 c. Operator's\* Address: \_\_\_\_\_  
 d. Special Handling Instructions and additional information: \_\_\_\_\_  
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
 e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S SIGNATURE: \_\_\_\_\_ Date: 

--	--	--	--	--

  
 f. Name and Address of Responsible Agency: \_\_\_\_\_  
 g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
 \*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2140

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell

b. Generating Location: Former Allied Chemical - Front Royal

c. Address: 101 Columbia Road  
Morristown, NJ 07960

d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

e. Phone No.: 973-455-6719

f. Phone No.: \_\_\_\_\_

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

Containers

1	3	8	8	9
---	---	---	---	---

k. Quantity \_\_\_\_\_ Units \_\_\_\_\_ No. 1 TYPE T

TYPE

DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS

P	- POUNDS
Y	- YARDS
M <sup>3</sup>	- CUBIC METERS
Y <sup>3</sup>	- CUBIC YARDS
O	- OTHER

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

#### TRANSPORTER II

a. Name: Reece Services, Inc.

b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE

d. Phone No.: 703-441-0999

e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

g. \_\_\_\_\_ Shipment Date \_\_\_\_\_

Driver Signature \_\_\_\_\_

h. Name: \_\_\_\_\_

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE

k. Phone No.: \_\_\_\_\_

l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

n. \_\_\_\_\_ Shipment Date \_\_\_\_\_

Driver Signature \_\_\_\_\_

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146

d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_ Receipt Date \_\_\_\_\_

Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_

b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No.

2141

## Section I

## GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell

b. Generating Location: Former Allied Chemical - Front Royal

c. Address: 101 Columbia Road  
Morristown, NJ 07960

d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

e. Phone No.: 973-455-6719

f. Phone No.: \_\_\_\_\_

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

k. Quantity \_\_\_\_\_ Units \_\_\_\_\_ No. 1 TYPE T

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

## Section II

## TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

## TRANSPORTER I

## TRANSPORTER II

a. Name: Reece Services, Inc.

b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE

d. Phone No.: 703-441-0999

e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

g. \_\_\_\_\_

Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

h. Name: \_\_\_\_\_

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_ PRINT / TYPE

k. Phone No.: \_\_\_\_\_

l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

n. \_\_\_\_\_

Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## Section III

## DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146

d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_

Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date \_\_\_\_\_

## Section IV

## ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_

b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

f. Name and Address  
of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

1142

**Section I****GENERATOR** (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

			L	I	8					Y	7		
--	--	--	---	---	---	--	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9
---	---	---	---	---

  
j. Description of Waste: Soil k. Quantity 

--	--	--	--	--

 Units 

--

 No. 

1
---

 TYPE 

T
---

  
From surface water impoundments  
and bermed pit

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

**Section II****TRANSPORTER** (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)**TRANSPORTER I**

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

**TRANSPORTER II**

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

**Section III****DESTINATION** (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

**Section IV****ASBESTOS** (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. \_\_\_\_\_

ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell  
b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road  
Morristown, NJ 07960  
d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630  
e. Phone No.: 973-455-6719  
f. Phone No.: \_\_\_\_\_  
g. Owner's Name: \_\_\_\_\_  
h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

GENERATORS CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

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Containers

TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

k. Quantity

Units

No.

TYPE

1	3	8	8	9	
---	---	---	---	---	--

--	--	--	--	--	--

1					
---	--	--	--	--	--

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, transporter completes e-g, transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999  
e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

g. Driver Signature

Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_  
l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.

n. Driver Signature

Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill  
b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091  
c. Phone No.: 800-785-2146  
d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent

Signature

Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_  
b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2144

## Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Honeywell

b. Generating Location: Former Allied Chemical - Front Royal

c. Address: 101 Columbia Road  
Morristown, NJ 07960

d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

e. Phone No.: 973-455-6719

f. Phone No.: \_\_\_\_\_

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: 410 782 1311

i. BFI WASTE CODE

		L	I	8						Y	7		
--	--	---	---	---	--	--	--	--	--	---	---	--	--

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Generators Certification: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name: F. Schroeder Signature: [Signature] Shipment Date: 120307

k. Quantity: 13889 Units: 1 No. 1 TYPE T

Containers

DM	DP	B	BA	T	O

TYPE

DM	DP	B	BA	T	O

UNITS

P	Y	M <sup>3</sup>	Y <sup>3</sup>	O

## Section II TRANSPORTER I

a. Name: Reece Services, Inc.

b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_

d. Phone No.: 703-441-0999 a. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: 11A402 VA

Acknowledgement of Receipt of Materials.

g. Driver Signature: [Signature] Shipment Date: 120307

## Section II TRANSPORTER II

h. Name: \_\_\_\_\_

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_

k. Phone No.: \_\_\_\_\_ i. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

n. Driver Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_

## Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146

d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indicator Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

## Section IV ASBESTOS (Generator completes a-d, i-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_

b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling instructions and additional information: \_\_\_\_\_

Operator's Certification: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2245

**Section I****GENERATOR** (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--

 Containers 

1	3	8	8	9
---	---	---	---	---

 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity 

--	--	--	--	--

 Units 

--	--	--	--	--

 No. 

1
---

 TYPE 

T
---

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.  
Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date 

--	--	--	--	--

**Section II****TRANSPORTER** (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)**TRANSPORTER I**

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature 

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 Shipment Date 

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**TRANSPORTER II**

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature 

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 Shipment Date 

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**Section III****DESTINATION** (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indicator Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date 

--	--	--	--	--

**Section IV****ASBESTOS** (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE 

--	--	--	--	--

 Date \_\_\_\_\_  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell

b. Generating Location: Former Allied Chemical - Front Royal

c. Address: 101 Columbia Road  
Morristown, NJ 07960

d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630

e. Phone No.: 973-455-6719

f. Phone No.: \_\_\_\_\_

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: \_\_\_\_\_

h. Owner's Phone No.: \_\_\_\_\_

i. BFI WASTE CODE

		L	I	8				Y	7

j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit

Containers

1	3	8	8	9
---	---	---	---	---

k. Quantity

--	--	--	--	--

Units

--	--	--	--	--

No.

1
---

TYPE

T
---

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG or WRAP  
T - TRUCK  
O - OTHER

UNITS  
P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.

b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026

c. Driver Name/Title: \_\_\_\_\_

d. Phone No.: 703-441-0999

e. Truck No.: \_\_\_\_\_

f. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

g. \_\_\_\_\_

Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

#### TRANSPORTER II

h. Name: \_\_\_\_\_

i. Address: \_\_\_\_\_

j. Driver Name/Title: \_\_\_\_\_

k. Phone No.: \_\_\_\_\_

l. Truck No.: \_\_\_\_\_

m. Vehicle License No./State: \_\_\_\_\_

Acknowledgement of Receipt of Materials.

n. \_\_\_\_\_

Driver Signature \_\_\_\_\_ Shipment Date \_\_\_\_\_

## Section III

### DESTINATION (Generator Completes a-d, Destination site completes e-f)

a. Site Name: King & Queen Landfill

b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091

c. Phone No.: 800-785-2146

d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091

e. Discrepancy Indication Space: \_\_\_\_\_

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. \_\_\_\_\_

Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date \_\_\_\_\_

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_

b. Operator's\* Phone No.: \_\_\_\_\_

c. Operator's\* Address: \_\_\_\_\_

d. Special Handling Instructions and additional information: \_\_\_\_\_

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

e. Operator's Name & Title: \_\_\_\_\_

PRINT / TYPE \_\_\_\_\_ OPERATOR'S\* SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

f. Name and Address of Responsible Agency: \_\_\_\_\_

g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

ORIGINAL

## Section I

### GENERATOR (Generator Completes all of Section I)

a. Generator Name: Honeywell b. Generating Location: Former Allied Chemical - Front Royal  
c. Address: 101 Columbia Road d. Address: Kendrick Lane Work Site  
Morristown, NJ 07960 Front Royal, VA 22630  
e. Phone No.: 973-455-6719 f. Phone No.: \_\_\_\_\_  
If owner of the generating facility differs from the generator, provide:  
g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
i. BFI WASTE CODE 

		L	I	8			Y	7	
--	--	---	---	---	--	--	---	---	--

 Containers 

1	3	8	8	9
---	---	---	---	---

 TYPE  
DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
T - TRUCK  
O - OTHER  
j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit  
k. Quantity 

--	--	--	--	--

 Units 

--	--

 No. 

1
---

 TYPE 

T
---

  
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

## Section II

### TRANSPORTER (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)

#### TRANSPORTER I

a. Name: Reece Services, Inc.  
b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026  
c. Driver Name/Title: \_\_\_\_\_  
d. Phone No.: 703-441-0999 e. Truck No.: \_\_\_\_\_  
f. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
g. Driver Signature 

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 Shipment Date

#### TRANSPORTER II

h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_  
j. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
m. Vehicle License No./State: \_\_\_\_\_  
Acknowledgement of Receipt of Materials.  
n. Driver Signature 

--	--	--	--	--

 Shipment Date

## Section III

### DESTINATION (Generator Completes a-d, destination site completes e-f)

a. Site Name: King & Queen Landfill c. Phone No.: 800-785-2146  
b. Physical Address: 4443 Iris RD d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091 Little Plymouth, VA 23091  
e. Discrepancy Indication Space: \_\_\_\_\_  
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
f. Name of Authorized Agent 

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 Signature Receipt Date

## Section IV

### ASBESTOS (Generator Completes a-d, f-g, Operator completes e)

a. Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
c. Operator's\* Address: \_\_\_\_\_  
d. Special Handling Instructions and additional information: \_\_\_\_\_  
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.  
e. Operator's Name & Title: \_\_\_\_\_ OPERATOR'S\* SIGNATURE 

--	--	--	--	--

 Date  
f. Name and Address of Responsible Agency: \_\_\_\_\_  
g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable  
\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

ORIGINAL

If waste is asbestos waste, complete Sections I, II, III and IV.  
If waste is NOT asbestos waste, complete only Sections I, II and III.

No.

2149

**Section I****GENERATOR** (Generator Completes all of Section I)

- a. Generator Name: Honeywell
- b. Generating Location: Former Allied Chemical - Front Royal
- c. Address: 101 Columbia Road  
Morristown, NJ 07960
- d. Address: Kendrick Lane Work Site  
Front Royal, VA 22630
- e. Phone No.: 973-455-6719
- f. Phone No.: \_\_\_\_\_
- g. Owner's Name: \_\_\_\_\_
- h. Owner's Phone No.: \_\_\_\_\_
- i. BFI WASTE CODE: 

		L	I	8				Y	7		
--	--	---	---	---	--	--	--	---	---	--	--
- j. Description of Waste: Soil  
From surface water impoundments  
and bermed pit
- k. Quantity: 

--	--	--	--	--	--	--	--

 Units: 

--	--	--	--	--	--	--	--

 No. 

--	--	--	--	--	--	--	--

 TYPE: 

--	--	--	--	--	--	--	--

Containers

TYPE

DM - METAL DRUM  
DP - PLASTIC DRUM  
B - BAG  
BA - 6 MIL. PLASTIC BAG  
or WRAP  
T - TRUCK  
O - OTHER

UNITS

P - POUNDS  
Y - YARDS  
M<sup>3</sup> - CUBIC METERS  
Y<sup>3</sup> - CUBIC YARDS  
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Generator Authorized Agent Name

Signature

Shipment Date

**Section II****TRANSPORTER** (Generator Completes a-d, Transporter completes e-g, Transporter II completes h-n)**TRANSPORTER I**

- a. Name: Reece Services, Inc.
- b. Address: 17756 Colonial Port RD.  
Dumfries, VA 22026
- c. Driver Name/Title: \_\_\_\_\_
- d. Phone No.: 703-441-0999 PRINT / TYPE
- e. Truck No.: \_\_\_\_\_
- f. Vehicle License No./State: \_\_\_\_\_
- g. Acknowledgement of Receipt of Materials.
- h. Driver Signature: 

--	--	--	--	--	--	--	--

 Shipment Date: 

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**TRANSPORTER II**

- h. Name: \_\_\_\_\_
- i. Address: \_\_\_\_\_
- j. Driver Name/Title: \_\_\_\_\_
- k. Phone No.: \_\_\_\_\_ PRINT / TYPE
- l. Truck No.: \_\_\_\_\_
- m. Vehicle License No./State: \_\_\_\_\_
- n. Acknowledgement of Receipt of Materials.
- o. Driver Signature: 

--	--	--	--	--	--	--	--

 Shipment Date: 

--	--	--	--	--	--	--	--

**Section III****DESTINATION** (Generator Completes a-d, destination site completes e-f)

- a. Site Name: King & Queen Landfill
- b. Physical Address: 4443 Iris RD  
Little Plymouth, VA 23091
- c. Phone No.: 800-785-2146
- d. Mailing Address: 4443 Iris RD  
Little Plymouth, VA 23091
- e. Discrepancy Indication Space: \_\_\_\_\_
- f. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
- g. Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

--	--	--	--	--	--	--	--

**Section IV****ASBESTOS** (Generator Completes a-d, f-g, Operator completes e)

- a. Operator's\* Name: \_\_\_\_\_
- b. Operator's\* Phone No.: \_\_\_\_\_
- c. Operator's\* Address: \_\_\_\_\_
- d. Special Handling Instructions and additional information: \_\_\_\_\_
- OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.
- e. Operator's Name & Title: \_\_\_\_\_ PRINT / TYPE
- f. Name and Address of Responsible Agency: \_\_\_\_\_ OPERATOR'S\* SIGNATURE
- g. ☐ Friable; ☐ Non-friable; ☐ Both \_\_\_\_\_ % friable \_\_\_\_\_ % non-friable
- \*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

DESTINATION RETURN: WHITE - RETURN TO GENERATOR, GREEN - RETURN TO OPERATOR, YELLOW - TRANSPORTER RETURN, PINK - GENERATOR RETURN, GOLD -

ORIGINAL

*Appendix E*  
*Quality Control*

# DAILY FIELD REPORT

200 Aviation Drive  
Winchester, VA 22602  
Phone 540-667-9300  
Facsimile 540-667-2260  
[www.triadeng.com](http://www.triadeng.com)

ORIGINAL  
**TRIAD**  
Triad Engineering, Inc.

DAILY FIELD REPORT NO.: 01  
PROJECT NO.: 07-07-0622  
PROJECT NAME: ERM-Former Avtex Fiber Plant

DATE ON-SITE: 12/03/07  
INSPECTOR/TECHNICIAN: Roger P. Addison  
TIME ON SITE: 0745-0945  
WEATHER: Cloudy/Windy - 40's

CLIENT: ECOR Solutions, Inc.  
1075 Andrew Drive, Suite I  
West Chester PA 19380  
Attn: Joe Dattoli

CONTRACTOR: ERM  
SUBCONTRACTOR(S):  
PERMIT NO(S):  
SITE LOCATION: Front Royal, VA  
AREA TESTED/LOT NO(S): Ditch Line

CC LIST:

## WORK OBSERVED:

1. Prior to Triad's arrival, the contractor had spread and compacted fill material in the old ditch-line. The area had been topsoiled and seeded (see sketch).


## SERVICE(S) PERFORMED:

Visual Observations  
Compaction Testing

## REMARKS:

1. All density tests did not meet minimum 90% compaction specification using the modified Proctor value of 120.0 pcf @ 13.0% moisture content. Contractor was notified of all test results.
2. Area had received rain the previous day.

Reviewed by:

  
Kevin D. Stemple, P.E.

Attachment(s): Sketch  
Compaction Control Summary Sheet

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# COMPACTION CONTROL SUMMARY SHEET

[illegible]

**TRIAD ENGINEERING, INC.**  
200 AVIATION DRIVE  
WINCHESTER, VA 22602  
(540) 667-9300

Triad Project Number: 07-07-U 622  
Project Name: EAM- FORMER AUTEX FIBER  
Location: \_\_\_\_\_  
Tested By: RPA Date: 12-3

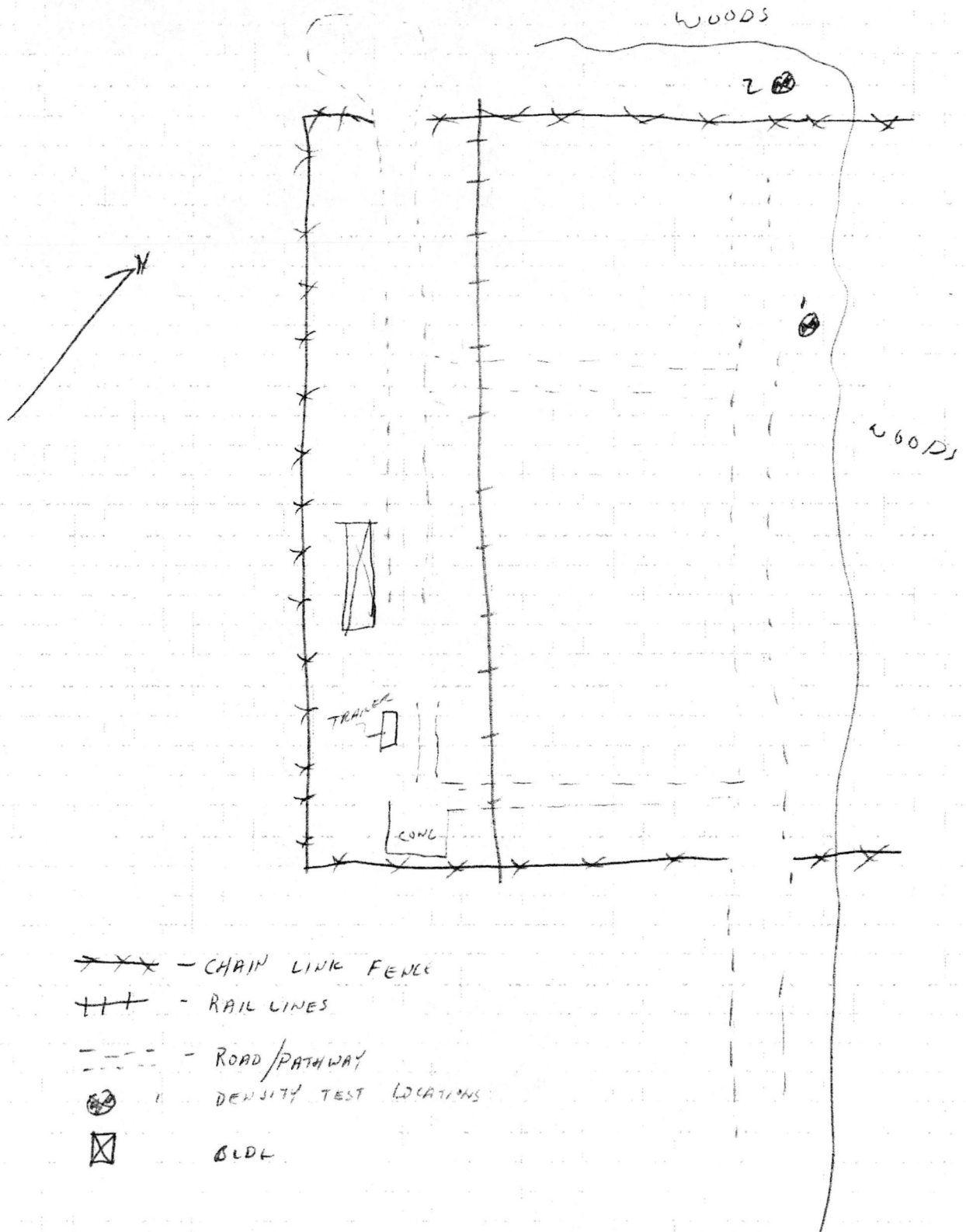
Triad Daily Report Number: /

ORIGINAL

ST. ALBANS • MORGANTOWN, WEST VIRGINIA  
WINCHESTER • PURCELLVILLE, VIRGINIA  
HAGERSTOWN, MARYLAND  
GREENSBURG, PENNSYLVANIA

**TRIAD**  
TRIAD ENGINEERING, INC.

Job. No. 07-07-0622	Item: DENSITY TEST LOCATIONS	By: RPA	Date: 12-3
Project: ERM FORMER AUTEX FIBER	Sheet of	Check:	Date:



December 6, 2007

Mr. Scott Mortimer  
ECOR Solutions, Inc.  
3333 West Marshall Street  
Richmond, VA 23230

RE: Laboratory Test Results  
ERM - Former Avtex Fiber Plant  
Front Royal, Virginia  
Triad Project No. 07-07-0622

Dear Mr. Mortimer:

Please find enclosed the results of the laboratory testing performed on the sample obtained at the reference project on November 12, 2007. Laboratory testing was performed at Triad Engineering, Inc. located in Winchester, Virginia. All testing was performed in accordance to the ASTM Test Specifications.

Should you have any questions, with regard to the information, please do not hesitate to contact us.

Sincerely,

**TRIAD ENGINEERING, INC.**

COPY

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Lloyd C. Winters, C.E.T.  
Director of Testing Services

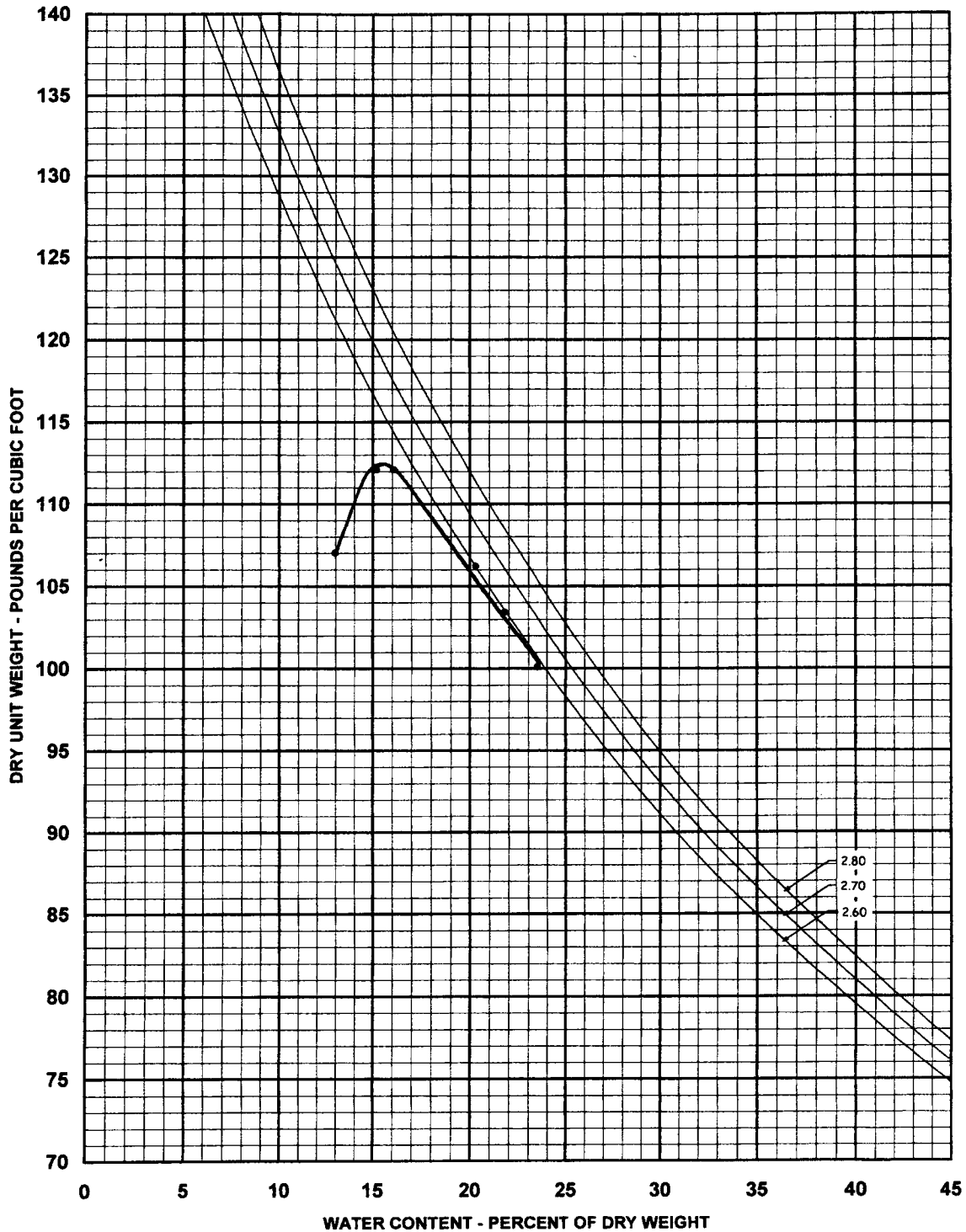
Attachments:

Plate C-1 through C-4



# PROCTOR COMPACTION TEST REPORT

ORIGINAL



BORING OR SAMPLE NO.	ELEVATION OR DEPTH	SAMPLE DESCRIPTION	% FINES	NATURAL % MOISTURE	LIQUID LIMIT	PLASTICITY INDEX	BULK SPECIFIC GRAVITY	U.S.C.S. SYMBOL
S-1	BULK	Orangish tan clayey SAND, little ggravel	33	19.0	42	19		SC

## PROCTOR TEST RESULTS

TEST METHOD: ASTM D-1557

NOTES:

Plus 3/4 Correction with 20 % = CDD = 120.0 pcf @ 13.0 % Mc

Maximum Dry Density (pcf)

Optimum Moisture (%)

112.5

15.5

**TRIAD**

TRIAD ENGINEERING, INC.  
P.O. BOX 2397  
200 AVIATION DRIVE  
WINCHESTER, VA

PROJECT NUMBER: 07-07-0622  
PROJECT NAME: ERM - Former Avtex Fiber Plant  
Front Royal, VA

PLATE  
C-2

## GRAIN SIZE DISTRIBUTION TEST DATA

11/28/2007

Client: ECOR Solutions, Inc.

Project: ERM - Former Autex Fiber Plant

Project Number: 07070622

Location: On Site

Sample Number: S-2

Material Description: Dark Brown silt with clay and some sand "Topsoil"

Date: 11-26-07

Testing Remarks: Organic Content = 4.0%

pH = 5.78

Tested by: DTB

Checked by: RAS

## Sieve Test Data

Post #200 Wash Test Weights (grams): Dry Sample and Tare = 500.40

Tare Wt. = 161.60

Minus #200 from wash = 68%

Dry Sample and Tare (grams)	Tare (grams)	Sieve Opening Size	Weight Retained (grams)	Sieve Weight (grams)	Percent Finer
1063.30	0.00	.375	0.00	0.00	100
		#4	15.10	0.00	99
		#10	13.30	0.00	97
		#20	28.80	0.00	95
		#40	36.80	0.00	91
		#100	131.30	0.00	79
		#200	108.20	0.00	69

## Fractional Composition

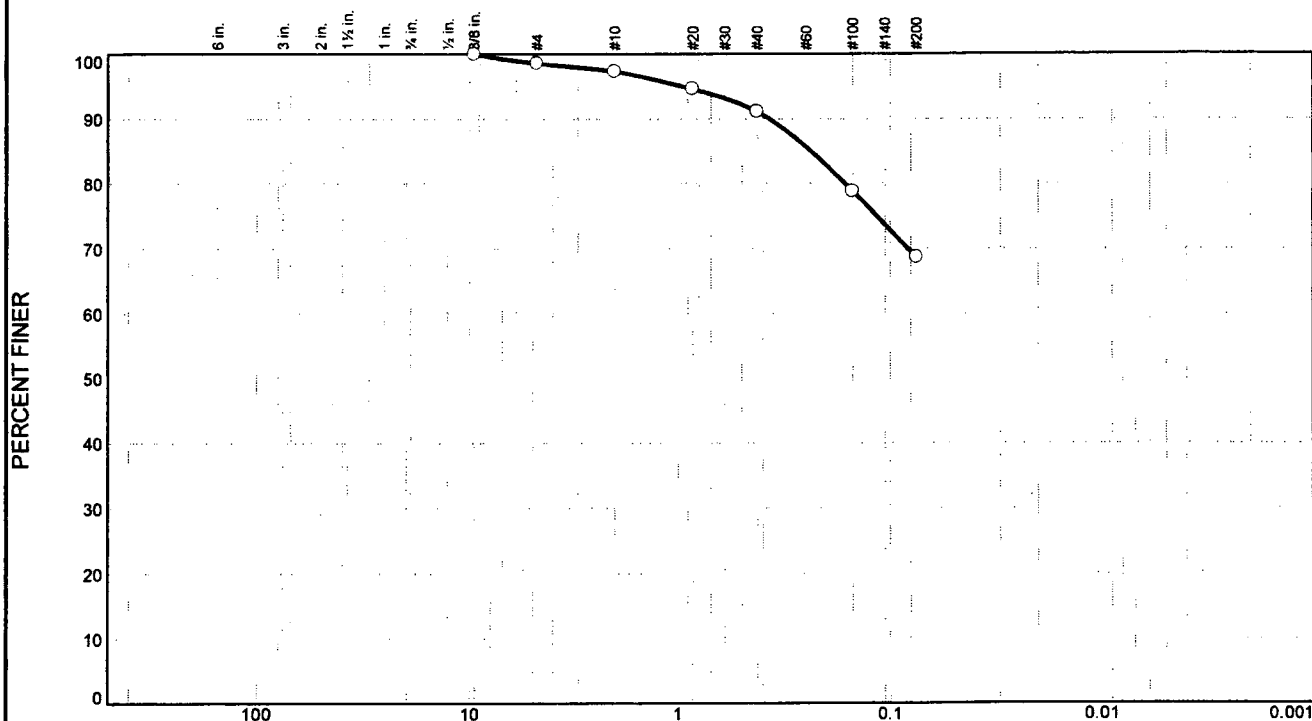
Cobbles	Gravel			Sand				Fines		
	Coarse	Fine	Total	Coarse	Medium	Fine	Total	Silt	Clay	Total
0	0	1	1	2	6	22	30			69

D <sub>10</sub>	D <sub>15</sub>	D <sub>20</sub>	D <sub>30</sub>	D <sub>50</sub>	D <sub>60</sub>	D <sub>80</sub>	D <sub>85</sub>	D <sub>90</sub>	D <sub>95</sub>
						0.1630	0.2357	0.3702	0.9428

Fineness Modulus
0.48

Triad Engineering, Inc.

## Particle Size Distribution Report



GRAIN SIZE - mm.

% +3"	% Gravel		% Sand			% Fines	
	Coarse	Fine	Coarse	Medium	Fine	Silt	Clay
0	0	1	2	6	22	69	

SIEVE SIZE	PERCENT FINER	SPEC.* PERCENT	PASS? (X=NO)
.375	100		
#4	99		
#10	97		
#20	95		
#40	91		
#100	79		
#200	69		

\* (no specification provided)

**Soil Description**  
Dark Brown silt with clay and some sand

PL=      **Atterberg Limits**      PI=  
LL=      **Coefficients**      D<sub>85</sub>= 0.2357      D<sub>60</sub>=      D<sub>50</sub>=  
D<sub>30</sub>=      D<sub>15</sub>=      D<sub>10</sub>=  
C<sub>u</sub>=      C<sub>c</sub>=

USCS=      **Classification**      AASHTO=

**Remarks**  
Organic Content = 4.0%  
pH = 5.78

Sample No.: S-2  
Location:

Source of Sample: On Site

Date: 11-26-07  
Elev./Depth:

**Triad Engineering, Inc.**

**Morgantown, WV**

Client: ECOR Solutions, Inc.  
Project: ERM - Former Autex Fiber Plant

Project No: 07070622

Tested By: DTB

Checked By: RAS

PLATE C-4